Fill in this information to identify y	our case:
United States Bankruptcy Court for	the:
Southern District of California	
Case number (If known):	Chapter you are filing under:
	Chapter 7
	Chapter 11
	Chapter 12
	Chapter 13

Check if this is an amended filing

# Official Form 101

# Voluntary Petition for Individuals Filing for Bankruptcy

06/22

The bankruptcy forms use *you* and *Debtor 1* to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a *joint case*—and in joint cases, these forms use *you* to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be *yes* if either debtor owns a car. When information is needed about the spouses separately, the form uses *Debtor 1* and *Debtor 2* to distinguish between them. In joint cases, one of the spouses must report information as Debtor 1 and the other as *Debtor 2*. The same person must be *Debtor 1* in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Part 1: Identify Yourself		
	About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
1. Your full name		
Write the name that is on your	JACOB	
government-issued picture	First name	First name
identification (for example, your driver's license or	NICHOLAS	
passport).	Middle name	Middle name
5	RODRIGUEZ	
Bring your picture identification to your meeting with the trustee.	Last name	Last name
	Suffix (Sr., Jr., II, III)	Suffix (Sr., Jr., II, III)
All other names you have used in the last 8 years	First name	First name
Include your married or maiden names.	Middle name	Middle name
	Last Name	Last Name
3. Only the last 4 digits of your Social Security number or federal Individual Taxpayer Identification number (ITIN)	xxx - xx - 4615	xxx - xx -

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Debtor 1 JACOB NICHOLAS RODRIGUEZ Case number (if known)

**About Debtor 1:** About Debtor 2 (Spouse Only in a Joint Case): 4. Any business names I have not used any business names or EINs. I have not used any business names or EINs. and Employer **Identification Numbers** (EIN) you have used in JACOB THE MOBILE NOTARY PUBLIC the last 8 years Business name Business name Include trade names and DE JURE MEDIA LLC doing business as names Business name EIN EIN EIN 5. Where you live If Debtor 2 lives at a different address: 866 DANENBERG DR Number Street Number Street **EL CENTRO** CA 92243 State ZIP Code ZIP Code City City IMPERIAL-CA County County If your mailing address is different from the one If Debtor 2's mailing address is different from above, fill it in here. Note that the court will send yours, fill it in here. Note that the court will send any notices to you at this mailing address. any notices to this mailing address. Number Number Street Street P.O. Box P.O. Box City State ZIP Code City State ZIP Code Check one: Check one: 6. Why you are choosing this district to file for Over the last 180 days before filing this petition, Over the last 180 days before filing this petition, bankruptcy I have lived in this district longer than in any I have lived in this district longer than in any

First Name

Middle Name

Last Name

other district.

I have another reason. Explain.

(See 28 U.S.C. § 1408.)

other district.

I have another reason. Explain.

(See 28 U.S.C. § 1408.)

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Debtor 1 **JACOB NICHOLAS RODRIGUEZ** Case number (if known) First Name Middle Name

Last Name

Pa	art 2: Tell the Court Abo	out Your I	3ankrup	tcy Case			
7.	The chapter of the Bankruptcy Code you						U.S.C. § 342(b) for Individuals Filing he appropriate box.
	are choosing to file	Cha	pter 7				
	under		pter 11				
		Cha	pter 12				
		Cha	pter 13				
8.	How you will pay the fee	I will pay the entire fee when I file my petition. Please check with the clerk's office in your local court for more details about how you may pay. Typically, if you are paying the fee yourself, you may pay with cash, cashier's check, or money order. If your attorney is submitting your payment on your behalf, your attorney may pay with a credit card or check with a pre-printed address.					
							option, sign and attach the ents (Official Form 103A).
		l re	quest tha	at my fee be wa	ived (You may	request this op	otion only if you are filing for Chapter 7. and may do so only if your income is
		less pay	than 150 the fee in	0% of the official n installments). I	poverty line the f you choose th	at applies to yo nis option, you r	and may do so only if your income is our family size and you are unable to must fill out the <i>Application to Have the</i> t with your petition.
9.	Have you filed for	No.					
	bankruptcy within the		District		When		Case Number
	last 8 years?					MM / DD / YYYY	
10.	Are any bankruptcy	No.					
	cases pending or being filed by a spouse who is	Yes.	Debtor _				Relationship to you
	not filing this case with		District		When		Case Number, if known
	you, or by a business partner, or by an affiliate?					MM / DD / YYYY	
11.	Do you rent your	No.	Go to lin	ne 12			
	residence?	Yes.	Has you	r landlord obtained	I an eviction judg	ment against you	1?
			No	No. Go to line 12	2		
				Fill out <i>Initial Sta</i>	atement About ar	n Eviction Judgm	ent Against You (Form 101A) and file it as
				part of this bank	ruptcy petition.		

First Name Middle Name Last Name

Part 3:

Report About Any Businesses You Own as a Sole Proprietor

# 12. Are you a sole proprietor of any full- or part-time business?

A sole proprietorship is a business you operate as an individual, and is not a separate legal entity such as a corporation, partnership, or LLC.

If you have more than one sole proprietorship, use a separate sheet and attach it to this petition.

No. Go to Part 4.

Yes. Name and location of business

#### JACOB THE MOBILE NOTARY PUBLIC

Name of business, if any

#### 866 DANENBERG DR

Number Street

 EL CENTRO
 CA
 92243

 City
 State
 ZIP Code

Check the appropriate box to describe your business:

Health Care Business (as defined in 11 U.S.C. § 101(27A))

Single Asset Real Estate (as defined in 11 U.S.C. § 101(51B))

Stockbroker (as defined in 11 U.S.C. § 101(53A))

Commodity Broker (as defined in 11 U.S.C. § 101(6))

None of the above

#### DE JURE MEDIA LLC

Name of business, if any

### 30 N Gould St

Number Street

STE R

 Sheridan
 WY
 82801

 City
 State
 ZIP Code

# 13. Are you filing under Chapter 11 of the Bankruptcy Code and are you a small business debtor or a debtor as defined by 11 U.S.C.§ 1182(1)?

For a definition of *small* business debtor, see 11 U.S.C. § 101(51D).

If you are filing under Chapter 11, the court must know whether you are a small business debtor or a debtor choosing to proceed under Subchapter V so that it can set appropriate deadlines. If you indicate that you are a small business debtor or you are choosing to proceed under Subchapter V, you must attach your most recent balance sheet, statement of operations, cash-flow statement, and federal income tax return or if any of these documents do not exist, follow the procedure in 11 U.S.C. § 1116(1)(B).

- No. I am not filing under Chapter 11.
- No. I am filing under Chapter 11, but I am NOT a small business debtor according to the definition in the Bankruptcy Code.
- Yes. I am filing under Chapter 11, I am a small business debtor according to the definition in the Bankruptcy Code, and I do not choose to proceed under Subchapter V of Chapter 11.
- Yes. I am filing under Chapter 11, I am a debtor according to the definition § 1182(1) of the Bankruptcy Code, and I choose to proceed under Subchapter V of Chapter 11.

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Part 4: Report if You Own o	or Have <i>i</i>	Any Hazardous Property	or Any F	Property That	Needs Imn	nediate	e Attention
14. Do you own or have any	No.						
property that poses or is	Yes.	What is the hazard?					
alleged to pose a threat of imminent and identifiable hazard to public health or safety? Or do you own any property that needs immediate attention?		If immediate attention is needed, why is it needed?  Where is the property?	Number	Street			
For example, do you own perishable goods, or livestock that must be fed, or a building that needs urgent repairs?			City			State	ZIP Code

First Name Middle Name Last Name

Part 5:

Explain Your Efforts to Receive a Briefing About Credit Counseling

## 15. Tell the court whether you have received a briefing about credit counseling.

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities

#### **About Debtor 1:**

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15

I am not required to receive a briefing about credit counseling because of:

I have a mental illness or a mental Incapacity.

deficiency that makes meincapable of realizing or making rational decisions about finances.

My physical disability causes me

Disability. to be unable to participate in a

> briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

Active duty. I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court. About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15

I am not required to receive a briefing about credit counseling because of:

I have a mental illness or a mental Incapacity.

deficiency that makes meincapable of realizing or making rational decisions about finances.

Disability. My physical disability causes me to be unable to participate in a

briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

Active duty. I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court. Case 22-02597-MM7 Filed 10/03/22 Entered 10/03/22 16:28:59 Doc 1 Pg. 7 of 71

Debtor 1 **JACOB NICHOLAS RODRIGUEZ** Case number (if known)

16. What kind of debts do you have?	16a.		consumer debts? Consumer debts are I primarily for a personal, family, or hou	
-		No. Go to line 16b.		
		Yes. Go to line 17		
	16b.		ousiness debts? Business debts are destment or through the operation of the	
		No. Go to line 16c.		
		Yes. Go to line 17		
	16c.	State the type of debts you	owe that are not consumer debts or bus	siness debts.
<sup>17.</sup> Are you filing under Chapter 7?	1	No. I am not filing under Cha	oter 7. Go to line 18	
Do you estimate that after any exempt property is	`	Yes. I am filing under Chapte administrative expenses	r 7. Do you estimate that after any exer are paid that funds will be available to	npt property is excluded and distribute to unsecured creditors?
excluded and		No		
administrative expenses		Yes		
are paid that funds will be available for distribution to unsecured creditors?		Tes		
18. How many creditors do		1-49	1,000-5,000	25,001-50,000
you estimate that you	;	50-99	5,001-10,000	50,001-100,000
owe?		100-199 200-999	10,001-25,000	More than 100,000
19. How much do you		\$0-\$50,000	\$1,000,001-\$10 million	\$500,000,001-\$1 billion
estimate your assets to		\$50,001-\$100,000	\$10,000,001-\$50 million	\$1,000,000,001-\$10 billion
be worth?	;	\$100,001-\$500,000	\$50,000,001-\$100 million	\$10,000,000,001-\$50 billion
		\$500,001-\$1 million	\$100,000,001-\$500 million	More than \$50 billion
<sup>20.</sup> How much do you		\$0-\$50,000	\$1,000,001-\$10 million	\$500,000,001-\$1 billion
estimate your liabilities		\$50,001-\$100,000	\$10,000,001-\$50 million	\$1,000,000,001-\$10 billion
to be?		\$100,001-\$500,000	\$50,000,001-\$100 million	\$10,000,000,001-\$50 billion
		\$500,001-\$1 million	\$100,000,001-\$500 million	More than \$50 billion
Part 7: Sign Below				
For you	corre	ct.	I declare under penalty of perjury that	
	of title		oter 7, I am aware that I may proceed, in nderstand the relief available under each	if eligible, under Chapter 7, 11,12, or 13 ch chapter, and I choose to proceed
	this d	locument, I have obtained an	d read the notice required by 11 U.S.C	
			the chapter of title 11, United States Co	
	with a		in fines up to \$250,000, or imprisonme	money or property by fraud in connection on the to 20 years, or both.
	X		X	
		gnature of Debtor 1	Signature	of Debtor 2
	Ex	secuted on 09/30/2022	Executed	on
	_,	MM / DD / YYYY		MM / DD / YYYY

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For your attorney, if you are represented by one  If you are not represented by an attorney, you do not need to file this page.	I, the attorney for the debtor(s) named in this petition, declar to proceed under Chapter 7, 11, 12, or 13 of title 11, United available under each chapter for which the person is eligible the notice required by 11 U.S.C. § 342(b) and, in a case in knowledge after an inquiry that the information in the schedule.	States Code, and e. I also certify tha which § 707(b)(4)(	I have explained the relief t I have delivered to the debtor(s) (D) applies, certify that I have no
	X	Date	
	Signature of Attorney for Debtor		MM / DD / YYYY
	Printed name		
	Firm name		
	Number Street		
	City	State	ZIP Code
	Contact phone	Email address	
	Bar number	State	

For you if you are filing this bankruptcy without an attorney

First Name

Middle Name

Last Name

If you are represented by an attorney, you do not need to file this page. The law allows you, as an individual, to represent yourself in bankruptcy court, but you should understand that many people find it extremely difficult to represent themselves successfully. Because bankruptcy has long-term financial and legal consequences, you are strongly urged to hire a qualified attorney.

To be successful, you must correctly file and handle your bankruptcy case. The rules are very technical, and a mistake or inaction may affect your rights. For example, your case may be dismissed because you did not file a required document, pay a fee on time, attend a meeting or hearing, or cooperate with the court, case trustee, U.S. trustee, bankruptcy administrator, or audit firm if your case is selected for audit. If that happens, you could lose your right to file another case, or you may lose protections, including the benefit of the automatic stay.

You must list all your property and debts in the schedules that you are required to file with the court. Even if you plan to pay a particular debt outside of your bankruptcy, you must list that debt in your schedules. If you do not list a debt, the debt may not be discharged. If you do not list property or properly claim it as exempt, you may not be able to keep the property. The judge can also deny you a discharge of all your debts if you do something dishonest in your bankruptcy case, such as destroying or hiding property, falsifying records, or lying. Individual bankruptcy cases are randomly audited to determine if debtors have been accurate, truthful, and complete. Bankruptcy fraud is a serious crime; you could be fined and imprisoned.

If you decide to file without an attorney, the court expects you to follow the rules as if you had hired an attorney. The court will not treat you differently because you are filing for yourself. To be successful, you must be familiar with the United States Bankruptcy Code, the Federal Rules of Bankruptcy Procedure, and the local rules of the court in which your case is filed. You must also be familiar with any state exemption laws that apply.

Are you aware that filing for bankruptcy is a serious action with long-term financial and legal consequences?

No

Yes

Are you aware that bankruptcy fraud is a serious crime and that if your bankruptcy forms are inaccurate or incomplete, you could be fined or imprisoned?

No

Yes

Did you pay or agree to pay someone who is not an attorney to help you fill out your bankruptcy forms?

No

Yes. Name of Person

Attach Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).

By signing here, I acknowledge that I understand the risks involved in filing without an attorney. I have read and understood this notice, and I am aware that filing a bankruptcy case without an attorney may cause me to lose my rights or property if I do not properly handle the case.

X		X	
Signature of D	ebtor 1	Signature of Debtor	r 2
Date	09/30/2022 MM / DD / YYYY	Date M	IM / DD / YYYY
Contact phone	442-236-0443	Contact phone	
Cell phone	442-236-0443	Cell phone	
Email address	jacobnrodz@gmail.com	Email address	

Debtor 1	JACOB	NICHOLAS	RODRIGUEZ	
	First Name	Middle Name	Last Name	
Debtor 2 (Spouse, if filing)				
	First Name	Middle Name	Last Name	
United States E	Bankruptcy Court	for the: Southern Disti	rict of California	

Check if this is an amended filing

# Official Form 106Dec

# Declaration About an Individual Debtor's Schedules

12/15

If two married people are filing together, both are equally responsible for supplying correct information.

You must file this form whenever you file bankruptcy schedules or amended schedules. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

No	
Yes. Name of person	. Attach Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).
er penalty of perjury, I declare that I h they are true and correct.	nave read the summary and schedules filed with this declaration and
	nave read the summary and schedules filed with this declaration and

Debtor 1	JACOB	NICHOLAS	RODRIGUEZ	
	First Name	Middle Name	Last Name	
Debtor 2 (Spouse, if filing)				
	First Name	Middle Name	Last Name	
United States E	Bankruptcy Court	for the: Southern Dist	rict of California	

Check if this is an amended filing

12/15

# Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new Summary and check the box at the top of this page.

Ju	r original forms, you must fill out a new Summary and check the box at the top of this page.		
2	Summarize Your Assets		
		Your ass	ets hat you own
١.	Schedule A/B: Property (Official Form 106A/B)		
	1a. Copy line 55, Total real estate, from Schedule A/B	\$	0.00
	1b. Copy line 62, Total personal property, from Schedule A/B	\$	10576.00
	1c. Copy line 63, Total of all property on Schedule A/B	\$	10576.00
06	art 2: Summarize Your Liabilities		
		Your liab Amount y	
	Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D)		
	2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D	\$	5000.00
	Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F)		
	3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of <i>Schedule E/F</i>	\$	157.00
	3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F	+ \$	27381.35
	Your total liabilities	\$	32538.35
) 6	Summarize Your Income and Expenses		
	Schedule I: Your Income (Official Form 106I)		
	Copy your combined monthly income from line 12 of Schedule I	\$	825.00
	Schedule J: Your Expenses (Official Form 106J)		
	Copy your monthly expenses from line 22c of Schedule J	\$	270.00

Part 4: Answer These Questions for Administrative and Statistical Records

Last Name

#### 6. Are you filing for bankruptcy under Chapters 7, 11, or 13?

Middle Name

No. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules. Yes

#### 7. What kind of debt do you have?

First Name

Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for a personal, family, or household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159.

Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules.

8. From the *Statement of Your Current Monthly Income*: Copy your total current monthly income from Official Form 122A-1 Line 11; **OR**, Form 122B Line 11; **OR**, Form 122C-1 Line 14.

\$ 85.00

9. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

	Total claim
From Part 4 on <i>Schedule E/F</i> , copy the following:	
9a. Domestic support obligations (Copy line 6a.)	\$0.00
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$0.00
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$0.00
9d. Student loans. (Copy line 6f.)	\$0.00
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+ \$0.00
9g. <b>Total.</b> Add lines 9a through 9f.	\$0.00

Fill in this inf	formation to identify	y your case:	
Debtor 1	JACOB	NICHOLAS	RODRIGUEZ
	First Name	Middle Name	Last Name
Debtor 2 (Spouse, if filing)			
	First Name	Middle Name	Last Name
United States	Bankruptcy Court for the	Southern District	of California
Case number (If known)			

Check if this is an amended filing

Official Form 106A/B

# Schedule A/B: Property

12/15

In each category, separately list and describe items. List an asset only once. If an asset fits in more than one category, list the asset in the category where you think it fits best. Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Part 1: Describe Each Residence, Building, Land, or Other Real Estate You Own or Have an Interest In

1. Do you own or have any legal or equitable interest in any residence, building, land, or similar property?

No. Go to Part 2.			
Yes. Where is the property?			
Street address, if available, or other descriptio	What is the property? Check all that apply.  Single-family home  Duplex or multi-unit building	Do not deduct secured of the amount of any secur- Creditors Who Have Cla	ed claims on <i>Schedule D</i>
Street address, il available, or other descriptio	Condominium or cooperative  Manufactured or mobile home	Current value of the entire property?	Current value of the portion you own?
City State ZIP Code  County	Land Investment property Timeshare Other Who has an interest in the property? Check one.	Describe the nature interest (such as fee the entireties, or a li	simple, tenancy by
	Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Other information you wish to add about this item such as local property identification number:	(see instructions)	community property
	for all of your entries from Part 1, including any entiber here.		0.0
		7	
Describe Your Vehicles			
	nterest in any vehicles, whether they are registered of the contract the contract of the contr		
Cars, vans, trucks, tractors, sport utility veh	icles, motorcycles		
Cars, vans, trucks, tractors, sport utility veh	icles, motorcycles		

Official Form 106A/B Schedule A/B: Property page 1

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Debtor 1 JACOB NICHOLAS RODRIGUEZ Case number (if known)

Middle Name

Last Name

First Name

Make: Who has an interest in the property? Check one. Do not deduct secured claims or exemptions. Put Debtor 1 only the amount of any secured claims on Schedule D: Model Creditors Who Have Claims Secured by Property. Debtor 2 only Year: Current value of the Current value of the Debtor 1 and Debtor 2 only Approximate mileage: entire property? portion you own? At least one of the debtors and another Other information: Check if this is community property (see instructions) 4. Watercraft, aircraft, motor homes, ATVs and other recreational vehicles, other vehicles, and accessories Examples: Boats, trailers, motors, personal watercraft, fishing vessels, snowmobiles, motorcycle accessories No Yes Make: Who has an interest in the property? Check one. Do not deduct secured claims or exemptions. Put the amount of any secured claims on Schedule D: Debtor 1 only Model Creditors Who Have Claims Secured by Property. Debtor 2 only Year: Current value of the Current value of the Debtor 1 and Debtor 2 only Other information: entire property? portion you own? At least one of the debtors and another Check if this is community property (see instructions)

0.00

5. Add the dollar value of the portion you own for all of your entries from Part 2, including any entries for pages

you have attached for Part 2. Write that number here.

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Debtor 1 JACOB NICHOLAS RODRIGUEZ Case number (if known)

P	Describe You	ir Personal and Household Items		
Do	you own or have any le	egal or equitable interest in any of the following items?	Current value portion you ov Do not deduct se or exemptions.	wn?
6.	Household goods and	furnishings		
	-	nces, furniture, linens, china, kitchenware		
		BOOKSHELF, BED, BEDDING, DESK, DRESSERS, CHAIRS, PICTURE FRAMES, NIGHTSTAND, TOWELS	\$	1500.00
7	Electronics			
	Examples: Televisions a	nd radios; audio, video, stereo, and digital equipment; computers, printers, scanners; music lectronic devices including cell phones, cameras, media players, games		
	No Yes. Describe	DESKTOP COMPUTER, MONITORS, MICROPHONE, AMPLIFIER, AUDIO INTERFACE, TV, CELLPHONE, HAM RADIO, MOUSE, WEBCAM, KEYBOARD	\$	2700.00
8.	Collectibles of value			
0.	Examples: Antiques and	figurines; paintings, prints, or other artwork; books, pictures, or other art objects; or baseball card collections; other collections, memorabilia, collectibles		
		BOOKS, COINS, PINS, OLD POSTERS	\$	1100.00
				-
9.		ographic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis; canoes carpentry tools; musical instruments	\$	
10.	Firearms			
	Examples: Pistols, rifles,	shotguns, ammunition, and related equipment		
	Yes. Describe		\$	
11	Clothes			
	Examples: Everyday clo	thes, furs, leather coats, designer wear, shoes, accessories		
	No Yos Doscribo	EVERYDAY CLOTHES, SUIT, SHOES	\$	700.00
	res. Describe		<b>*</b>	700.00
12.	Jewelry  Examples: Everyday jew gold, silver  No	velry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gems,		
		WATCH	\$	50.00

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13. Non-farm animals  Examples: Dogs, cats, birds, horses  No  Yes. Describe	\$ 300.00
Any other personal and household items you did not already list, including any health aids you did not list     No     Yes. Give specific information	\$ 150.00
15. Add the dollar value of all of your entries from Part 3, including any entries for pages you have attached for Part 3. Write that number here. →	\$ 6500.00

Official Form 106A/B Schedule A/B: Property page 4

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Debtor 1 JACOB NICHOLAS RODRIGUEZ Case number (if known)

Pa	art 4: Describe You	r Financial Assets					
Do	you own or have any le	gal or equitable inter	est in any	y of the following?		Current valu portion you Do not deduct or exemptions.	own? secured claims
16	Cash						
10.		ava in vaur wallat in va	ur bomo	in a safe denseit have and an hand when you file	. vour potition		
	Examples. Worley you no	ave iii your wallet, iii yo	our nome,	in a safe deposit box, and on hand when you file	your pennon		
	No						
	Yes				Cash:	\$	45.00
17.	Deposits of money						
				s; certificates of deposit; shares in credit unions, iple accounts with the same institution, list each.		S,	
				······································			
	No Voc			Institution name:			
	Yes			Institution name:			
		17.1 Checking acc	ount:	US BANK		\$	11.00
			_				
18.	Bonds, mutual funds, o	•					
		nvestment accounts w	ith broker	age firms, money market accounts			
	No						
	Yes	Institution or issuer name	e:				
						\$	
19.	Non-publicly traded sto an LLC, partnership, an No Yes. Give specific information about them		corporat	ed and unincorporated businesses, including	<b>an interest in</b> % of ownership:		
		DE JURE MEDIA LLO	С		100 %	\$	0.00
	Negotiable instruments in	nclude personal checks nts are those you cann Issuer name:	s, cashiers	ole and non-negotiable instruments s' checks, promissory notes, and money orders. r to someone by signing or delivering them.		\$	
	Examples: Interests in IF	RA, ERISA, Keogh, 40°	1(k), 403(	o), thrift savings accounts, or other pension or pro	ofit-sharing plans		
	No						
	Yes. List each account separately.	Type of account:		Institution name:			
						\$	

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22.	Security deposits and prepayments		
	Your share of all unused deposits you have made so that you may continue service or use from a company <i>Examples</i> : Agreements with landlords, prepaid rent, public utilities (electric, gas, water), telecommunications companies, or others		
	No		
	Yes	\$	
23.	Annuities (A contract for a periodic payment of money to you, either for life or for a number of years)		
	No		
	Yes Issuer name and description:	\$	
24.	Interests in an education IRA, in an account in a qualified ABLE program, or under a qualified state tuition program 26 U.S.C. §§ 530(b)(1), 529A(b), and 529(b)(1).	i-	
	No		
	Yes	\$	
25.	Trusts, equitable or future interests in property (other than anything listed in line 1), and rights or powers exercisable for your benefit		
	No		
	Yes. Give specific	\$	
	information about them		
26	Patents, copyrights, trademarks, trade secrets, and other intellectual property		
20.	Examples: Internet domain names, websites, proceeds from royalties and licensing agreements		
	No	•	
	Yes. Give specific information about them	\$	
27.	Licenses, franchises, and other general intangibles		
	Examples: Building permits, exclusive licenses, cooperative association holdings, liquor licenses, professional licenses		
	No		
	Yes. Give specific information about them	\$	0.00
Мо	oney or property owed to you?		Current value of the portion you own? Do not deduct secured claims or exemptions.
28.	Tax refunds owed to you		
	No		
	Yes. Give specific information Federal:	\$	
	about them, including whether	φ φ	
	and the tax years.	Φ -	
	Local:	\$	

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29.	Family support	spousal support, child support, maintenance, divorce s	sattlement property settle	ement	
	No	spousal support, child support, maintenance, divorce s	settlement, property settle	cilicili	
	Yes. Give specific information		Alimony:	\$	
			Maintenance:		
			Support		
			Divorce Settlement:		
			Property Settlement:	\$	
30	Other amounts someone owes you				
00.		nce payments, disability benefits, sick pay, vacation pa	y, workers' compensatio	n,	
		d loans you made to someone else	,,	•	
	No				
	Yes. Give specific information	EXPECTED CA STATE "MIDDLE CLASS TAX REFU REBATE; NOT YET RECEIVED	ND" INFLATION	\$	350.00
31.	Interests in insurance policies				
	Examples: Health, disability, or life insurar	nce; health savings account (HSA); credit, homeowner's	s, or renter's insurance		
	No Yes. Name the insurance company				
	of each policy and list its value	Company name: Benefici	ary:		
				\$	
32.	Any interest in property that is due you	from someone who has died xpect proceeds from a life insurance policy, or are curre	antly antitled to receive		
	property because someone has died.	xpect proceeds from a life insurance policy, or are curre	ently entitled to receive		
	No Yes. Give specific information			\$	
	Test. Give spesific information.			·	
33.	Claims against third parties, whether or	not you have filed a lawsuit or made a demand for	payment		
	Examples: Accidents, employment dispute	es, insurance claims, or rights to sue			
	No	AUTO INSURANCE (UNINSURED MOTORIST POLIC	~Y) WITH	œ	2500.00
	Yes. Give specific information	WAWANESA GENERAL INSURANCE CO.; CLAIM #	*	\$	3500.00
34.	Other contingent and unliquidated claim to set off claims	ns of every nature, including counterclaims of the d	ebtor and rights		
	No				
	Yes. Give specific information			\$	
35.	Any financial assets you did not already	list			
	No				
	Yes. Give specific information			\$	
36	Add the dollar value of all of your entries	s from Part 4, including any entries for pages you h	ave attached		
55.				\$	3906.00

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Debtor 1 JACOB **NICHOLAS RODRIGUEZ** Case number (if known) First Name Middle Name Last Name

Pa	art 5: Describe Any Business-Related Property You Own or Have an Interest In. List any	real estate in Part 1.
37.	Do you own or have any legal or equitable interest in any business-related property?	
	No. Go to Part 6.	
	Yes. Go to line 38.	
		Current value of the portion you own? Do not deduct secured claims or exemptions.
38.	Accounts receivable or commissions you already earned	
	No	_
	Yes. Describe	\$
39.	Office equipment, furnishings, and supplies	
	Examples: Business-related computers, software, modems, printers, copiers, fax machines, rugs, telephones, desks, chairs, electronic d	evices
	NO	7
	Yes. Describe LOCKABLE BRIEFCASE, PENS, THUMPRINT INK PAD	\$120.00
40.	Machinery, fixtures, equipment, supplies you use in business, and tools of your trade	_
	No	_
	Yes. Describe OFFICIAL NOTARY PUBLIC SELF-INKING STAMP, OFFICIAL NOTARY JOURNAL	\$50.00
41.	. Inventory	_
	No	
	Yes. Describe	\$
42	Interests in partnerships or joint ventures	
	No	
	Yes. Describe Name of entity: % of ownership:	
	0 %	\$
12	Customer lists, mailing lists, or other compilations	
45.	No	
	Yes. Do your lists include personally identifiable information (as defined in 11 U.S.C. § 101(41A))?	
	No	_
	Yes. Describe	\$
44.	. Any business-related property you did not already list	_
-	No	
	Yes. Give specific	
	information	
		\$
45.	. Add the dollar value of all of your entries from Part 5, including any entries for pages you have attached	
	for Part 5. Write that number here	\$170.00

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ebtor 1	JACOB	NICHOLAS	RODRIGUEZ	Case number (if known)	
	First Name	Middle Name	Last Name		

Pa	rt 6:	Describe Any Farm- and Commercial Fishing-Related Property You Own or Have an Interest If you own or have an interest in farmland, list it in Part 1.	ln.
46.	No.	own or have any legal or equitable interest in any farm- or commercial fishing-related property?  Go to Part 7.  Go to line 47.	
			Current value of the portion you own? Do not deduct secured claims or exemptions.
47.	Farm a	nimals	
	Example	es: Livestock, poultry, farm-raised fish	
	No		
	Yes	·	\$
48.	Crops-	-either growing or harvested	
	No		
	Yes info	s. Give specific prmation	\$
49.	Farm a	nd fishing equipment, implements, machinery, fixtures, and tools of trade	
	No		
	Yes	S	\$
50.	Farm a	nd fishing supplies, chemicals, and feed	
	No		\$
	Yes	S	
51.	Any far	m- and commercial fishing-related property you did not already list	
	No		
		s. Give specific prmation	\$
52.		e dollar value of all of your entries from Part 6, including any entries for pages you have attached	
	for Part	6. Write that number here	\$

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Debtor 1 **JACOB** RODRIGUEZ **NICHOLAS** Case number (if known) First Name Middle Name

Last Name

Part 7: Describe All Property You Own or Have an Interest in That You Did Not List Above 53. Do you have other property of any kind you did not already list? Examples: Season tickets, country club membership No Yes. Give specific information ..... 0.00 Part 8: List the Totals of Each Part of this Form 55. Part 1: Total real estate, line 2 0.00 56. Part 2: Total vehicles, line 5 0.00 57. Part 3: Total personal and household items, line 15 \$ 6500.00 58. Part 4: Total financial assets, line 36 \$ 3906.00 59. Part 5: Total business-related property, line 45 \$ 170.00 60. Part 6: Total farm- and fishing-related property, line 52 61. Part 7: Total other property not listed, line 54 0.00 62. Total personal property. Add lines 56 through 61. .......... 10576.00 Copy personal property total -10576.00 63. Total of all property on Schedule A/B. Add line 55 + line 62. 10576.00

Official Form 106A/B Schedule A/B: Property page 10

Debtor 1	JACOB	NICHOLAS	RODRIGUEZ	
	First Name	Middle Name	Last Name	
Debtor 2 (Spouse, if filing)				
	First Name	Middle Name	Last Name	
· · · · · · · · · · · · · · · · · · ·	First Name	Middle Name for the: Southern Dist		

Check if this is an amended filing

# Official Form 106C

# Schedule C: The Property You Claim as Exempt

04/22

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

Р	art 1: Iden	tify the Property You Clai	m as Exempt		
1.	You are cl	exemptions are you claiming? aiming state and federal nonbar aiming federal exemptions. 11 L	nkruptcy exemptions. 11		
2.	For any prope	erty you list on <i>Schedule A/B</i> th	at you claim as exem	pt, fill in the information below.	
		on of the property and line on nat lists this property	Current value of the portion you own?  Copy the value from Schedule A/B	Amount of the exemption you claim  Check only one box for each exemption.	Specific laws that allow exemption
	Brief description:	BOOKSHELF, BED, BEDDING, DESK, DRESSERS, CHAIRS, PICTURE FRAMES, NIGHTSTAND, TOWELS	\$ 1500.00	\$1500.00 100% of fair market value, up to any applicable statutory limit	Cal. Civ. Proc. Code § 703.140 (b)(3)
	Line from Schedule A/B:	6			
	Brief description:	DESKTOP COMPUTER, MONITORS, MICROPHONE, AMPLIFIER, AUDIO INTERFACE, TV, CELLPHONE, HAM RADIO, MOUSE, WEBCAM, KEYBOARD	\$ 2700.00	\$	Cal. Civ. Proc. Code § 703.140 (b)(3)
	Line from Schedule A/B:	7			
	Brief description: Line from Schedule A/B:	BOOKS, COINS, PINS, OLD POSTERS	\$1100.00	\$1100.00 100% of fair market value, up to any applicable statutory limit	Cal. Civ. Proc. Code § 703.140 (b)(3)

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Debtor 1 JACOB NICHOLAS RODRIGUEZ Case number (if known)

	on of the property and line on nat lists this property		value of the you own?	Amount of t	ne exemption you claim	Specific laws that allow exemption
		Copy the	e value from le A/B	Check only one box for each exemption.		
Brief description:	EVERYDAY CLOTHES, SUIT, SHOES	\$	700.00		700.00	Cal. Civ. Proc. Code § 703.140 (b)(3)
Line from Schedule A/B:	11				of fair market value, up to blicable statutory limit	(-)(-)
Brief description:	WATCH	\$	50.00		50.00	Cal. Civ. Proc. Code § 703.140 (b)(4)
Line from Schedule A/B:	12				f fair market value, up to Dicable statutory limit	(-)(-)
Brief description:	DOG	\$	300.00	\$	300.00	Cal. Civ. Proc. Code § 703.140
Line from Schedule A/B:	13				f fair market value, up to licable statutory limit	(b)(3)
Brief description:	PERSCRIPTION GLASSES	\$	150.00		150.00	Cal. Civ. Proc. Code § 703.140 (b)(9)
Line from Schedule A/B:	14				of fair market value, up to blicable statutory limit	(2)(0)
Brief description:	Cash on Hand	\$	45.00	-	45.00	Cal. Civ. Proc. Code § 703.140 (b)(5); Cal. Civ. Proc. Code §
Line from Schedule A/B:	16				f fair market value, up to plicable statutory limit	703.140 (b)(1)
Brief description:	Checking Account US BANK	\$	11.00		11.00	Cal. Civ. Proc. Code § 703.140 (b)(5); Cal. Civ. Proc. Code §
Line from Schedule A/B:	<u>17.1</u>				of fair market value, up to blicable statutory limit	703.140 (b)(1)
Brief description:	DE JURE MEDIA LLC	\$	0.00	\$	0.00	Cal. Civ. Proc. Code § 703.140
Line from Schedule A/B:	19.1				f fair market value, up to licable statutory limit	(b)(5); Cal. Civ. Proc. Code § 703.140 (b)(1)
Brief description:	CALIFORNIA NOTARY PUBLIC COMMISSION	\$	0.00	\$	0.00	Cal. Civ. Proc. Code § 703.140
Line from Schedule A/B:					f fair market value, up to licable statutory limit	(b)(5); Cal. Civ. Proc. Code § 703.140 (b)(1)
Brief description:	EXPECTED CA STATE "MIDDLE CLASS TAX REFUND" INFLATION	\$	350.00		350.00  If fair market value, up to blicable statutory limit	Cal. Civ. Proc. Code § 703.140 (b)(5); Cal. Civ. Proc. Code § 703.140 (b)(1)
Line from	REBATE; NOT YET RECEIVED			any app	oncable statutory limit	
Line from Schedule A/B:	30					

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Debtor 1 JACOB **NICHOLAS RODRIGUEZ** Case number (if known)

Pa	rt 2: Addi	itional Page			
		on of the property and line on nat lists this property	Current value of the portion you own?	Amount of the exemption you claim	Specific laws that allow exemption
			Copy the value from Schedule A/B	Check only one box for each exemption.	
_	Brief description:	AUTO INSURANCE (UNINSURED MOTORIST POLICY) WITH WAWANESA GENERAL INSURANCE CO.; CLAIM #1930783 DENIED	\$3500.00	\$3500.00 100% of fair market value, up to any applicable statutory limit	Cal. Civ. Proc. Code § 703.140 (b)(5); Cal. Civ. Proc. Code § 703.140 (b)(1)
_	_ine from Schedule A/B:	33			
_	Brief description:	LOCKABLE BRIEFCASE, PENS, THUMPRINT INK PAD	\$120.00	\$120.00  100% of fair market value, up to any applicable statutory limit	Cal. Civ. Proc. Code § 703.140 (b)(6)
_	ine from Schedule A/B:	39		any applicable statutory limit	
	Brief description:	OFFICIAL NOTARY PUBLIC SELF-INKING STAMP, OFFICIAL NOTARY JOURNAL	\$ 50.00	\$50.00_ 100% of fair market value, up to any applicable statutory limit	Cal. Civ. Proc. Code § 703.140 (b)(6)
	_ine from Schedule A/B:	40			
		ing a homestead exemption of ustment on 4/01/25 and every 3		es filed on or after the date of adjustmen	t.)
	No				
	Yes. Did vo	ou acquire the property covered	by the exemption within	1,215 days before you filed this case?	
	No		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	, , ,	
	Yes				

Debtor 1	JACOB	NICHOLAS	RODRIGUEZ	
	First Name	Middle Name	Last Name	
Debtor 2 (Spouse, if filing)				
	First Name	Middle Name	Last Name	
United States E	Bankruptcy Court	for the: Southern Dist	rict of California	

Check if this is an amended filing

# Official Form 106D

# Schedule D: Creditors Who Have Claims Secured by Property

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the Additional Page, fill it out, number the entries, and attach it to this form. On the top of any additional pages, write your name and case number (if known).

- 1. Do any creditors have claims secured by your property?
  - No. Check this box and submit this form to the court with your other schedules. You have nothing else to report on this form.
  - Yes. Fill in all of the information below.

or each claim. If more than one creditor has	re than one secured claim, list the creditor separately a particular claim, list the other creditors in Part 2. setical order according to the creditor's name.	Column Amount of Do not de value of co	of claim educt the	Column B Value of collateral that supports this claim	Column C Unsecured portion If any
D.D.S. COLLISION  Creditor's Name  7501 SOUTH WESTERN AVENUE  Number Street	Describe the property that secures the claim:  REMAINS OF DESTROYED VEHICLE: 2015 MAZDA MAZDA 3 (VIN: 3MZBM1U79FM223330)  As of the date you file, the claim is: Check all that apply.	\$	5000.00	\$4000.00	\$1000.0
LOS ANGELES CA 90047  City State ZIP Code  Who owes the debt? Check one.  Debtor 1 only  Debtor 2 only  Debtor 1 and Debtor 2 only  At least one of the debtors and another  Check if this claim is for a community debt	Contingent  Unliquidated Disputed  Nature of lien. Check all that apply.  An agreement you made (such as mortgage or secured car loan) Statutory lien (such as tax lien, mechanic's lien) Judgment lien from a lawsuit Other (including a right to offset)				
Date debt was incurred 8/8/2022	Last 4 digits of account number 3330				

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Debtor 1 JACOB NICHOLAS RODRIGUEZ

First Name Middle Name Last Name

Case number (if known)

Last Name

Part	2: List Others to Be Notified for a Debt That You Already Lis	ted
agen you l	this page only if you have others to be notified about your bankruptcy for a decy is trying to collect from you for a debt you owe to someone else, list the creave more than one creditor for any of the debts that you listed in Part 1, list thotified for any debts in Part 1, do not fill out or submit this page.	editor in Part 1, and then list the collection agency here. Similarly, if
3.1	LIEN SALE SERVICE Name PO BOX 9334	On which line in Part 1 did you enter the creditor? 2.1  Last 4 digits of account number 3330

91609

ZIP Code

CA

State

Number

City

Street

NORTH HOLLYWOOD

Fill in this inf	ormation to ide	entify your case:		
Debtor 1	JACOB	NICHOLAS	RODRIGUEZ	
	First Name	Middle Name	Last Name	
Debtor 2 (Spouse, if filing)				
	First Name	Middle Name	Last Name	
United States E	Bankruptcy Court f	or the: Southern Dist	rict of California	
Case number (If known)			_	

Check if this is an amended filing

# Official Form 106E/F

# Schedule E/F: Creditors Who Have Unsecured Claims

12/1

Be as complete and accurate as possible. Use Part 1 for creditors with PRIORITY claims and Part 2 for creditors with NONPRIORITY claims. List the other party to any executory contracts or unexpired leases that could result in a claim. Also list executory contracts on *Schedule A/B: Property* (Official Form 106A/B) and on *Schedule G: Executory Contracts and Unexpired Leases* (Official Form 106G). Do not include any creditors with partially secured claims that are listed in *Schedule D: Creditors Who Have Claims Secured by Property*. If more space is needed, copy the Part you need, fill it out, number the entries in the boxes on the left. Attach the Continuation Page to this page. On the top of any additional pages, write your name and case number (if known).

Par	t 1: List All of Y	our PRI	ORITY Unsec	cured Claims					
<b>2.</b> L e n	ach claim listed, idention on priority amounts. As nsecured claims, fill our	unsecuify what ty much as at the Cor	red claims. If a ope of claim it is. possible, list the attnuation Page of	creditor has more than one priority unsecured claim, list If a claim has both priority and nonpriority amounts, list e claims in alphabetical order according to the creditor's of Part 1. If more than one creditor holds a particular class instructions for this form in the instruction booklet.)	that nam	claim here ne. If you ha	and show bot ave more than	n priori two pr	ty and
Ì	·	,	·	,	To	otal claim	Priority amount		priority ount
2.1	CITY OF SANTA Me Priority Creditor's Name PO BOX 515214 Number Street	ONICA		Last 4 digits of account number E318  When was the debt incurred? 6/3/22  As of the date you file, the claim is: Check all that apply	\$_	157.00	\$ 157.00	\$	0.00
	LOS ANGELES City	CA State	90051-6514 ZIP Code	Contingent Unliquidated Disputed					
	Who incurred the deb Debtor 1 only Debtor 2 only Debtor 1 and Debt At least one of the	tor 2 only		Type of PRIORITY unsecured claim:  Domestic support obligations  Taxes and certain other debts you owe the government Claims for death or personal injury while you were intoxicated					
	Check if this clain		community debt	Other. Specify PARKING CITATION FINE					
	No Yes								

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Debtor 1 **JACOB NICHOLAS RODRIGUEZ** Case number (if known)

First Name Middle Name Last Name

#### Part 2: List ALL of Your NONPRIORITY Unsecured Claims 3. Do any creditors have nonpriority unsecured claims against you? No. You have nothing to report in this part. Submit this form to the court with your other schedules. 4. List all of your nonpriority unsecured claims in the alphabetical order of the creditor who holds each claim. If a creditor has more than one nonpriority unsecured claim, list the creditor separately for each claim. For each claim listed, identify what type of claim it is. Do not list claims already included in Part 1. If more than one creditor holds a particular claim, list the other creditors in Part 3. If you have more than three nonpriority unsecured claims fill out the Continuation Page of Part 2. Total claim 4.1 AFFIRM INC Last 4 digits of account number DN0M 235.14 Nonpriority Creditor's Name When was the debt incurred? 11/24/21 650 CALIFORNIA ST Number Street FL 12 SAN FRANCISCO CA 94108 As of the date you file, the claim is: Check all that apply ZIP Code State Contingent Who incurred the debt? Check one. Unliquidated Debtor 1 only Disputed Debtor 2 only Type of NONPRIORITY unsecured claim: Debtor 1 and Debtor 2 only Student loans At least one of the debtors and another Obligations arising out of a separation agreement or divorce Check if this claim is for a community debt that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Is the claim subject to offset? Other. Specify No BUY NOW, PAY LATER FINANCING Yes 4.2 AFFIRM INC Last 4 digits of account number ZQBO 274.56 Nonpriority Creditor's Name When was the debt incurred? 5/2/22 650 CALIFORNIA ST Number Street FL 12 SAN FRANCISCO CA 94108 As of the date you file, the claim is: Check all that apply ZIP Code Contingent Who incurred the debt? Check one. Unliquidated Debtor 1 only Disputed Debtor 2 only Type of NONPRIORITY unsecured claim: Debtor 1 and Debtor 2 only Student loans At least one of the debtors and another Obligations arising out of a separation agreement or divorce Check if this claim is for a community debt that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Is the claim subject to offset? Other. Specify No BUY NOW, PAY LATER FINANCING Yes 4.3 AFFIRM INC Last 4 digits of account number 4ZZ7 511.31 Nonpriority Creditor's Name When was the debt incurred? 11/4/21 650 CALIFORNIA ST Number Street FL 12 SAN FRANCISCO CA 94108 As of the date you file, the claim is: Check all that apply State ZIP Code

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Debtor 1 JACOB NICHOLAS RODRIGUEZ Case number (if known)

r listin	g any entries on this page, r	number the	em beginning wit	h 4, followed by 4.5, and so forth.	Tot	al claim
	o incurred the debt? Check one.  Debtor 1 only			Contingent Unliquidated		
	Debtor 2 only			·		
	Debtor 1 and Debtor 2 only			Type of NONPRIORITY unsecured claim:		
	At least one of the debtors and an	other		Student loans		
	Check if this claim is for a cor	nmunity de	bt	Obligations arising out of a separation agreement or divorce that you did not report as priority claims		
ls th	Debtor 1 only Debtor 2 only Debtor 2 only Debtor 3 and Debtor 2 only Debtor 4 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt the claim subject to offset? No Yes  LYBANK DEBOX 870377  When was the debt incurred? 7/24/22  As of the date you file, the claim is: Check all that apply At least one of the debtors and another Check if this claim is for a community debt  Last 4 digits of account number 6123  When was the debt incurred? 7/24/22  As of the date you file, the claim is: Check all that apply Contingent Unliquidated Disputed  Type of NONPRIORITY unsecured claim:  Student loans Debtor 1 only Debtor 1 only Debtor 1 only Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt the claim subject to offset? No Yes  APITAL ONE Repriority Creditor's Name DBOX 85520  The file of NONPRIORITY unsecured claim is: Check all that apply As of the date you file, the claim is priority claims Debtor 1 only Debtor 2 only APITAL ONE Repriority Creditor's Name DBOX 85520  When was the debt incurred? 8/1/20  When was the debt incurred? 8/1/20  As of the date you file, the claim is: Check all that apply  As of the date you file, the claim is: Check all that apply  As of the date you file, the claim is: Check all that apply  As of the date you file, the claim is: Check all that apply					
				BUY NOW, PAY LATER FINANCING		
				Last 4 digits of account number 6123	\$_	89.8
	•			When was the debt incurred 2. 7/04/00		
				when was the debt incurred? (//24/22		
	II ADEL BUIA	DΛ	10176 0277	_		
City	ILADELFTIIA			As of the date you file, the claim is: Check all that apply		
,	n incurred the debt? Check one			Contingent		
				Unliquidated		
	· ·			Disputed		
	•			Type of NONPRIORITY unsecured claim:		
	•	othor		Student loans		
			ht	Obligations arising out of a separation agreement or divorce		
	Officer if this claim is for a cor	illianity de	Di.			
Is th	ne claim subject to offset?					
	No			• •		
	Yes			OVERDRAWIN CHECKING ACCOUNT		
				Last 4 digits of account number 0350	\$_	2099.0
	•			When was the debt incurred? 8/1/20		
				- When was the dest incurred: 0/1/20		
— BIC	HMOND		23285			
City	N IWO NE			As of the date you file, the claim is: Check all that apply		
Whe	a incurred the debt? Check and			Contingent		
				Unliquidated		
	•			Disputed		
	·			Type of NONPRIORITY unsecured claim:		
	•	othor		Student loans		
			bt	Obligations arising out of a separation agreement or divorce		
1- 41				Debts to pension or profit-sharing plans, and other similar debts		
	•			Other. Specify		
				CREDIT CARD		
	PITAL ONF			Last 4 digits of account number 0891	\$	4100.0
LOAL	· · · -			<u> </u>	· -	

fter	listing any entries on this pa	ge, number th	em beginning v	vith 4, followed by 4.5, and so forth.	Tota	ıl claim
	PO BOX 85520 Number Street			When was the debt incurred? 12/6/19		
	Number Sirect			<u> </u>		
	RICHMOND City	VA State	23285 ZIP Code	As of the date you file, the claim is: Check all that apply		
	Who incurred the debt? Check		ZIP Code	Contingent		
		one.		Unliquidated		
	Debtor 1 only Debtor 2 only			Disputed		
	Debtor 1 and Debtor 2 only			Type of NONPRIORITY unsecured claim:		
	At least one of the debtors a	nd another		Student loans		
	Check if this claim is for	a community d	ebt	Obligations arising out of a separation agreement or divorce that you did not report as priority claims		
	Is the claim subject to offset?			Debts to pension or profit-sharing plans, and other similar debts		
	No			Other. Specify		
	Yes			CREDIT CARD		
7	CITIBANK, N.A.  Nonpriority Creditor's Name			Last 4 digits of account number 0328	\$	553.0
	50 NW POINT BLVD			When was the debt incurred? 1/20/22		
	Number Street			<u> </u>		
		IL	60007			
	ELK GROVE VILLAGE City	State	ZIP Code	As of the date you file, the claim is: Check all that apply		
	Who incurred the debt? Check			Contingent		
	Debtor 1 only	0110.		Unliquidated		
	Debtor 2 only			Disputed		
	Debtor 1 and Debtor 2 only			Type of NONPRIORITY unsecured claim:		
	At least one of the debtors a	nd another		Student loans		
	Check if this claim is for	a community d	ebt	Obligations arising out of a separation agreement or divorce that you did not report as priority claims		
	Is the claim subject to offset?			Debts to pension or profit-sharing plans, and other similar debts		
	No			Other. Specify		
	Yes			CREDIT CARD		
3	CBW BANK			Last 4 digits of account number 2639	\$	399.
	Nonpriority Creditor's Name			When we the debt in sure 10, 1/00/00		
	5301 KIETZKE LANE Number Street			When was the debt incurred? 4/28/22		
	RENO City	NV State	89511 ZIP Code	As of the date you file, the claim is: Check all that apply		
	Who incurred the debt? Check		0006	Contingent		
	Debtor 1 only	·····		Unliquidated		
	Debtor 2 only			Disputed		
	Debtor 1 and Debtor 2 only			Type of NONPRIORITY unsecured claim:		
	At least one of the debtors a	nd another		Student loans		
	Check if this claim is for	a community d	ebt	Obligations arising out of a separation agreement or divorce that you did not report as priority claims		
	Is the claim subject to offset?			Debts to pension or profit-sharing plans, and other similar debts		
	No			Other. Specify		

After	listing any entries on this page,	number th	em beginning v	vith 4, followed by 4.5, and so forth.	Tot	al claim
	Yes			BUY NOW, PAY LATER FINANCING		
.9	CBW BANK			Last 4 digits of account number 6226	\$	188.84
	Nonpriority Creditor's Name			<del></del>		
	5301 KIETZKE LANE			When was the debt incurred? 11/20/21		
	Number Street					
	RENO	NV	89511	As of the date you file, the claim is: Check all that apply		
	City	State	ZIP Code	Contingent		
	Who incurred the debt? Check one	•		Unliquidated		
	Debtor 1 only			Disputed		
	Debtor 2 only			Type of NONPRIORITY unsecured claim:		
	Debtor 1 and Debtor 2 only			••		
	At least one of the debtors and a	nother		Student loans		
	Check if this claim is for a co	ommunity d	ebt	Obligations arising out of a separation agreement or divorce that you did not report as priority claims		
	Oncok ii tiiis olaiiii is ioi a o	Jimmumiy u	CDI	Debts to pension or profit-sharing plans, and other similar debts		
	Is the claim subject to offset?			Other. Specify		
	Check if this claim is for a community debt  Is the claim subject to offset?  No Yes  CREDIT ONE BANK NA Nonpriority Creditor's Name PO BOX 98875 Number Street  LAS VEGAS  NV 89193		,			
	Yes			BUY NOW, PAY LATER FINANCING		
10				Last 4 digits of account number 2802	\$_	619.00
	Nonpriority Creditor's Name			WII 4 114 10 4/00/00		
				When was the debt incurred? 4/30/22		
	Number Street					
	LAS VEGAS	NV	89193	As of the date you file, the claim is: Check all that apply		
	City	State	ZIP Code	Contingent		
	Who incurred the debt? Check one			Unliquidated		
	Debtor 1 only			Disputed		
	Debtor 2 only			·		
	Debtor 1 and Debtor 2 only			Type of NONPRIORITY unsecured claim:		
	At least one of the debtors and a	nother		Student loans		
	Check if this claim is for a co	ommunity d	ebt	Obligations arising out of a separation agreement or divorce that you did not report as priority claims		
	Is the claim subject to offset?			Debts to pension or profit-sharing plans, and other similar debts		
	No			Other. Specify		
	Yes			CREDIT CARD		
11	DISCOVER BANK			Last 4 digits of account number 4728	\$	6057.00
	Nonpriority Creditor's Name				Ψ_	0001.00
	PO BOX 15316			When was the debt incurred? 6/28/18		
	Number Street					
	WILMINGTON	DE	19850			
	City	State	ZIP Code	As of the date you file, the claim is: Check all that apply		
	•			Contingent		
	Who incurred the debt? Check one	•		Unliquidated		
	Debtor 1 only			Disputed		
	Debtor 2 only			Type of NONPRIORITY unsecured claim:		
	Debtor 1 and Debtor 2 only			Student loans		

Last Name

Part 2: Your NONPRIORITY Unsecured Claims - Continuation Page After listing any entries on this page, number them beginning with 4.., followed by 4.5, and so forth. **Total claim** Obligations arising out of a separation agreement or divorce Check if this claim is for a community debt that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Is the claim subject to offset? Other. Specify No **CREDIT CARD** Yes 4.12 JPMorgan Chase Bank Last 4 digits of account number 1578 2953.00 Nonpriority Creditor's Name When was the debt incurred? 4/26/22 PO BOX 15298 Number Street WILMINGTON DE 19850 As of the date you file, the claim is: Check all that apply City State ZIP Code Contingent Who incurred the debt? Check one. Unliquidated Debtor 1 only Disputed Debtor 2 only Type of NONPRIORITY unsecured claim: Debtor 1 and Debtor 2 only Student loans At least one of the debtors and another Obligations arising out of a separation agreement or divorce Check if this claim is for a community debt that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Is the claim subject to offset? Other. Specify No **CREDIT CARD** Yes 4.13 JPMORGAN CHASE BANK Last 4 digits of account number 4594 29.70 Nonpriority Creditor's Name When was the debt incurred? 5/2/22 PO BOX 15298 Number Street WILMINGTON DE 19850 As of the date you file, the claim is: Check all that apply State ZIP Code Contingent Who incurred the debt? Check one. Unliquidated Debtor 1 only Disputed Debtor 2 only Type of NONPRIORITY unsecured claim: Debtor 1 and Debtor 2 only Student loans At least one of the debtors and another Obligations arising out of a separation agreement or divorce Check if this claim is for a community debt that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Is the claim subject to offset? Other. Specify No OVERDRAWN BANK CHECKING ACCOUNT Yes 4.14 MACYS/CITIBANK NA Last 4 digits of account number 2249 119.00 Nonpriority Creditor's Name When was the debt incurred? 6/30/19 9111 DUKE BLVD Number Street MASON OH 45040 As of the date you file, the claim is: Check all that apply City State ZIP Code Contingent Who incurred the debt? Check one

First Name

Middle Name

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Debtor 1 JACOB NICHOLAS RODRIGUEZ Case number (if known)

fter	listing any entries on this page, number the	nem beginning v	vith 4, followed by 4.5, and so forth.	Tota	ıl claim
			Unliquidated		
	Debtor 1 only		Disputed		
	Debtor 2 only		Type of NONPRIORITY unsecured claim:		
	Debtor 1 and Debtor 2 only				
	At least one of the debtors and another  Check if this claim is for a community of	leht	Student loans  Obligations arising out of a separation agreement or divorce that you did not report as priority claims		
	Is the claim subject to offset?	iebt	Debts to pension or profit-sharing plans, and other similar debts		
	No		Other. Specify		
	Yes		CREDIT CARD		
15	NET PAY ADVANCE, INC Nonpriority Creditor's Name		Last 4 digits of account number 4615	\$	309.1
	6820 WEST CENTRAL AVENUE		When was the debt incurred? 7/5/22		
	Number Street				
	WICHITA KS	67212	As of the date you file, the claim is: Check all that apply		
	City State	ZIP Code			
	Who incurred the debt? Check one.		Contingent		
	Debtor 1 only		Unliquidated		
	Debtor 2 only		Disputed		
	Debtor 1 and Debtor 2 only		Type of NONPRIORITY unsecured claim:		
At least one	At least one of the debtors and another		Student loans		
	Check if this claim is for a community of	lebt	Obligations arising out of a separation agreement or divorce that you did not report as priority claims		
	Is the claim subject to offset?		Debts to pension or profit-sharing plans, and other similar debts		
	No		Other. Specify		
	Yes		PAYDAY LOAN		
_					
6	SEZZLE		Last 4 digits of account number FLBG	\$	23.
	Nonpriority Creditor's Name		When was the debt incurred 2, 7/4 4/99		
	PO BOX 3320		When was the debt incurred? 7/14/22		
	Number Street				
	MINNEAPOLIS MN	55403	As of the date you file, the claim is: Check all that apply		
	City State	ZIP Code	Contingent		
	Who incurred the debt? Check one.		Unliquidated		
	Debtor 1 only		Disputed		
	Debtor 2 only		Type of NONPRIORITY unsecured claim:		
	Debtor 1 and Debtor 2 only		Type of NONFRIORITT unsecured claim.		
	At least one of the debtors and another		Student loans Obligations arising out of a separation agreement or divorce		
	Check if this claim is for a community of the claim subject to offset?	ept	that you did not report as priority claims  Debts to pension or profit-sharing plans, and other similar debts		
	No		Other. Specify		
	Yes		BUY NOW, PAY LATER FINANCING		
7	CHECK 'N GO		Last 4 digits of account number 7352	\$	300.
	Nonpriority Creditor's Name			<i>'</i> —	
	7755 MONTGOMERY ROAD				

First Name Middle Name Last Name

Part 2: Your NONPRIORITY Unsecured Claims - Continuation Page After listing any entries on this page, number them beginning with 4.., followed by 4.5, and so forth. **Total claim** When was the debt incurred? 7/19/22 **CINCINNATI** ОН 45236 As of the date you file, the claim is: Check all that apply State ZIP Code Contingent Who incurred the debt? Check one. Unliquidated Debtor 1 only Disputed Debtor 2 only Type of NONPRIORITY unsecured claim: Debtor 1 and Debtor 2 only Student loans At least one of the debtors and another Obligations arising out of a separation agreement or divorce Check if this claim is for a community debt that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Is the claim subject to offset? Other. Specify No PAYDAY LOAN Yes 4.18 Last 4 digits of account number 3271 CHECK 'N GO \$ 117.64 Nonpriority Creditor's Name When was the debt incurred? 6/28/22 7755 MONTGOMERY ROAD Number Street **CINCINNATI** OH 45236 As of the date you file, the claim is: Check all that apply City State ZIP Code Contingent Who incurred the debt? Check one. Unliquidated Debtor 1 only Disputed Debtor 2 only Type of NONPRIORITY unsecured claim: Debtor 1 and Debtor 2 only Student loans At least one of the debtors and another Obligations arising out of a separation agreement or divorce Check if this claim is for a community debt that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Is the claim subject to offset? Other. Specify Nο PAYDAY LOAN Yes 4.19 ULINE Last 4 digits of account number 3773 117.79 Nonpriority Creditor's Name When was the debt incurred? 5/9/22 PO BOX 88741 Number Street **CHICAGO** Ш 60680-1741 As of the date you file, the claim is: Check all that apply ZIP Code Contingent Who incurred the debt? Check one. Unliquidated Debtor 1 only Disputed Debtor 2 only Type of NONPRIORITY unsecured claim: Debtor 1 and Debtor 2 only At least one of the debtors and another Obligations arising out of a separation agreement or divorce Check if this claim is for a community debt that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Is the claim subject to offset? Other. Specify No

After	listing any entries on this page, n	ing any entries on this page, number them beginning with 4, followed by 4.5, and so forth.				Total claim	
	Yes			UNPAID INVOICE FOR GOODS			
.20	WEBBANK/DFS			Last 4 digits of account number 0608	\$_	4030.00	
	Nonpriority Creditor's Name  12234 N IH 35 SB  Number Street			When was the debt incurred? 11/14/19			
	BLDG B			<u> </u>			
	AUSTIN City	TX State	78753 ZIP Code	As of the date you file, the claim is: Check all that apply			
	Who incurred the debt? Check one. Debtor 1 only			Contingent Unliquidated Disputed			
	Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another  Check if this claim is for a community debt			Type of NONPRIORITY unsecured claim:  Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims			
	s the claim subject to offset?  No			Debts to pension or profit-sharing plans, and other similar debts Other. Specify			
	Yes			CREDIT CARD			
4.21	WELLS FARGO BANK, N.A. Nonpriority Creditor's Name			Last 4 digits of account number 1408	\$ 4116.	4116.0	
	101 EXECUTIVE CTR DR Number Street			When was the debt incurred? 12/8/21			
	SUITE 201						
	COLUMBIA City	SC State	29210 ZIP Code	As of the date you file, the claim is: Check all that apply  Contingent			
	Who incurred the debt? Check one.  Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another  Check if this claim is for a community debt  Is the claim subject to offset? No			Unliquidated			
				Disputed  Type of NONPRIORITY unsecured claim:			
				Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Other. Specify			
	Yes			CREDIT CARD			
1.22	WELLS FARGO BANK, N.A. Nonpriority Creditor's Name			Last 4 digits of account number 8978	\$_	138.2	
	101 EXECUTIVE CTR DR Number Street			When was the debt incurred? 5/10/22			
	SUITE 201 COLUMBIA	SC	29210	As of the date you file, the claim is: Check all that apply			
	City  Who incurred the debt? Check one.  Debtor 1 only	State	ZIP Code	Contingent Unliquidated			
	Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only			Disputed  Type of NONPRIORITY unsecured claim:  Student loans			

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Debtor 1 **JACOB NICHOLAS RODRIGUEZ** Case number (if known)

Part 2: Your NONPRIORITY Unsecured Claims - Continuation Page

After listing any entries on this page, number them beginning with 4.., followed by 4.5, and so forth.

Last Name

**Total claim** 

Check if this claim is for a community debt

Middle Name

Is the claim subject to offset?

No Yes

First Name

Obligations arising out of a separation agreement or divorce

that you did not report as priority claims

Debts to pension or profit-sharing plans, and other similar debts

Other. Specify

OVERDRAWN BANK CHECKING ACCOUNT

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Debtor 1 JACOB NICHOLAS RODRIGUEZ Case number (if known)

First Name Middle Name Last Name

Part 3.	List Others to F	se Notified About a	Deht That You	Already Lister
rait 3.	LIST OTHERS TO E	e Notified About a	Debt mat rou	All eauly Listed

example, if a collection agence 2, then list the collection agen	cy is trying ncy here. S	to collect from imilarly, if you	oout your bankruptcy, for a debt that you already listed in Parts 1 or 2. For in you for a debt you owe to someone else, list the original creditor in Parts 1 or in have more than one creditor for any of the debts that you listed in Parts 1 or 2, list the Il persons to be notified for any debts in Parts 1 or 2, do not fill out or submit this page.					
	LDC COLLECTION SYSTEMS			On which entry in Part 1 or Part 2 did you list the original creditor?				
Name								
PO BOX 515213 Number Street		Line 2.1 of (Check one):	Part 1: Creditors with Priority Unsecured Claims					
			Part 2: Creditors with Nonpriority Unsecured Claims					
LOS ANGELES	CA	90051-6513	Last 4 digits of account num	nber E318				
City	State	ZIP Code						
TRUEACCORD			On which entry in Part 1 or Part 2 did you list the original creditor?					
Name								
16011 COLLEGE BLVD			Line 4.1 of (Check one):	Part 1: Creditors with Priority Unsecured Claims				
Number Street				Part 2: Creditors with Nonpriority Unsecured Claims				
LENEXA	KS	66219	Last 4 digits of account number DN0M					
City	State	ZIP Code	-					
TRUEACCORD		On which entry in Part 1 or Part 2 did you list the original creditor?						
Name								
16011 COLLEGE BLVD Number Street			Line 4.3 of (Check one):	Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims				
LENEXA	KS	66219	Last 4 digits of account num	nber 4ZZ7				
City	State	ZIP Code	-					
UPLIFT, INC.			On which entry in Part 1 or I	Part 2 did you list the original creditor?				
440 NORTH WOLFE ROAD			Line 4.8 of (Check one):	Part 1: Creditors with Priority Unsecured Claims				
Number Street				Part 2: Creditors with Nonpriority Unsecured Claims				
SUNNYVALE	CA	94085	Last 4 digits of account num	nber 2639				
City	State	ZIP Code						
LIDUET INC			On which entry in Bort 1 or I	Part 2 did you list the original creditor?				
UPLIFT, INC. Name			on windi entry in Part 1 of t	art 2 did you list the original creditor?				
440 NORTH WOLFE ROAD			Line 4.9 of (Check one):	Part 1: Creditors with Priority Unsecured Claims				
Number Street			<u> </u>	Part 2: Creditors with Nonpriority Unsecured Claims				
SUNNYVALE	CA	94085	Last 4 digits of account num	nber 6226				
City	State	ZIP Code	-					

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Case number (if known) Debtor 1 **JACOB RODRIGUEZ NICHOLAS** First Name Middle Name Last Name

Part 4: Add the Amounts for Each Type of Unsecured Claim 6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. § 159. Add the amounts for each type of unsecured claim. **Total claim** 6a. Domestic support obligations 6a. **Total claims** 0.00 from Part 1 6b. Taxes and certain other debts you owe the government 6b. 0.00 6c. Claims for death or personal injury while you were intoxicated 6c. 0.00 6d. Other. Add all other priority unsecured claims. Write that amount here. 6d. 157.00 6e. Total. Add lines 6a through 6d. 6e. 157.00 **Total claim** 6f. 6f. Student loans **Total claims** from Part 2 0.00 6g. Obligations arising out of a separation agreement or divorce that you did not report as priority 0.00 claims 6g. 6h. Debts to pension or profit-sharing plans, and other similar debts 6h. 0.00 6i. Other. Add all other nonpriority unsecured claims. Write that amount here. 27381.35

6j. Total. Add lines 6f through 6i.

6j.

27381.35

Fill in this information to identify your case:							
Debtor 1	JACOB	NICHOLAS	RODRIGUEZ				
	First Name	Middle Name	Last Name				
Debtor 2 (Spouse, if filing)							
-	First Name	Middle Name	Last Name				
United States Bankruptcy Court for the: Southern District of California							
Case number (If known)							

Check if this is an amended filing

#### Official Form 106G

# Schedule G: Executory Contracts and Unexpired Leases 12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
  - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
  - Yes. Fill in all of the information below even if the contracts or leases are listed on Schedule A/B: Property (Official Form 106A/B).
- 2. List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

Person or company with who	m you have the contract or lease	State what the contract or lease is for
Name		
Number Street		
City	State ZIP Code	

Fill in this information to identify your case:							
Debtor 1	JACOB	NICHOLAS	RODRIGUEZ				
	First Name	Middle Name	Last Name				
Debtor 2 (Spouse, if filing)							
	First Name	Middle Name	Last Name				
United States Bankruptcy Court for the: Southern District of California							
Case number (If known)			_				

Check if this is an amended filing

### Official Form 106H

### Schedule H: Your Codebtors

12/15

Codebtors are people or entities who are also liable for any debts you may have. Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the Additional Page, fill it out, and number the entries in the boxes on the left. Attach the Additional Page to this page. On the top of any Additional Pages, write your name and case number (if known). Answer every question.

your	name and case number (if known). Answer every question.	
1.	Do you have any codebtors? (If you are filing a joint case, do not list either spouse as No Yes	a codebtor.)
2.	Within the last 8 years, have you lived in a community property state or territory?  Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washin No. Go to line 3.  Yes. Did your spouse, former spouse, or legal equivalent live with you at the time?  No  Yes. In which community state or territory did you live?	ngton, and Wisconsin.)
3.	Name of your spouse, former spouse, or legal equivalent    Number   Street	Make sure you have listed the creditor on
	Schedule E/F, or Schedule G to fill out Column 2.  Column 1: Your codebtor	Column 2: The creditor to whom you owe the debt Check all schedules that apply:
	Name Number Street	Schedule D, line Schedule E/F, line Schedule G, line
	City State ZIP Code	

Fill in this inf	formation to identify	your case:		
Debtor 1	JACOB	NICHOLAS	RODRIGUEZ	
	First Name	Middle Name	Last Name	Check if this is:
Debtor 2 (Spouse, if filing)				An amended filing
	First Name	Middle Name	Last Name	A supplement showing postpetition chapter 13
United States E	Bankruptcy Court for the	Southern District	of California	income as of the following date:
Case number (If known)				MM / DD / YYYY

#### Official Form 106I

### Schedule I: Your Income

12/15

Be as complete and accurate as possible. If two married people are filing together (Debtor 1 and Debtor 2), both are equally responsible for supplying correct information. If you are married and not filing jointly, and your spouse is living with you, include information about your spouse. If you are separated and your spouse is not filing with you, do not include information about your spouse. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

#### Part 1: **Describe Employment** 1. Fill in your employment Debtor 1 Debtor 2 or non-filing spouse information. If you have more than one job, attach a separate page with **Employment Status Employed** Employed information about additional Not employed Not employed employers. Include part-time, seasonal, or self-employed work. Occupation may Include student or homemaker, if it applies Occupation **NOTARY PUBLIC** Employer's name SELF-EMPLOYED 866 DANENBERG DR **Employer's address** Number Street Number Street **EL CENTRO** CA 92243 City State Zip Code City State Zip Code How long employed there? 3 YEARS Occupation **COLLEGE STUDENT** Employer's name IMPERIAL VALLEY COLLEGE 380 E Aten Rd **Employer's address** Number Street Number Street **IMPERIAL** CA 92251 City State Zip Code City State Zip Code How long employed there? 4 YEARS

Case number (if known)

Debtor 1 JACOB NICHOLAS RODRIGUEZ

First Name Middle Name Last Name

Part 2: Give Details About Monthly Income

Estimate monthly income as of the date you file this form. If you have nothing to report for any line, write \$0 in the space. Include your non-filling spouse unless you are separated.

If you or your non-filing spouse have more than one employer, combine the information for all employers for that person on the lines below. If you need more space, attach a separate sheet to this form.

	beid	ow. If you need more space, attach a separate sheet to this form.			
				For Debtor 1	For Debtor 2 or non-filing spouse
2.		monthly gross wages, salary, and commissions (before all payroll actions). If not paid monthly, calculate what the monthly wage would be.	2.	\$0.00	\$
3.	Esti	mate and list monthly overtime pay.	3.	+ \$0.00	+ \$
4.	Calc	culate gross income. Add line 2 + line 3.	4.	\$0.00	\$
	Сор	y line 4 here	4.	\$	\$
5.	List	all payroll deductions:			
	5a.	Tax, Medicare, and Social Security deductions	5a.	\$0.00	\$
	5b.	Mandatory contributions for retirement plans	5b.	\$0.00	\$
	5c.	Voluntary contributions for retirement plans	5c.	\$0.00	\$
	5d.	Required repayments of retirement fund loans	5d.	\$0.00	\$
	5e.	Insurance	5e.	\$0.00	\$
	5f.	Domestic support obligations	5f.	\$0.00	\$
	5g.	Union dues	5g.	\$0.00	\$
	5h.	Other deductions. Specify:	5h.	+ \$0.00	+\$
			5h.	+ \$	+ \$
3.	Add	the payroll deductions. Add lines 5a + 5b + 5c + 5d + 5e +5f + 5g + 5h.	6.	\$	\$
7.	Calc	culate total monthly take-home pay. Subtract line 6 from line 4.	7.	\$0.00	\$
8.	List	all other income regularly received:			
	8a.	Net income from rental property and from operating business, profession, or farm			
		Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income.	8a.	\$30.00	\$
	8b.	Interest and dividends	8b.	\$0.00	\$
	8c.	Family support payment that you, a non-filing spouse, or a dependent regularly receive			
		Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.	8c.	\$0.00	\$
		Unemployment compensation	8d.	\$ 0.00	\$

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Debtor 1 **RODRIGUEZ JACOB NICHOLAS** Case number (if known) First Name

Middle Name

Last Name

For Debtor 1 For Debtor 2 or non-filing spouse 8e. Social Security 8e. 0.00 Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify: 8f. 0.00 8f. Pension or retirement income 8g. 0.00 8h. Other monthly income. Specify: TAKING SURVEYS FOR AMAZON 8h. + \$ 45.00 **GIFT CARDS** 8h. 9. Add all other income. Add lines 8a + 8b + 8c + 8d + 8e + 8f + 8g + 8h. 75.00 10. Calculate monthly income. Add line 7 + line 9. 75.00 75.00 Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse. 10. 11. State all other regular contributions to the expenses that you list in Schedule J. Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or relatives. Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in Schedule J. Specify: HOUSING, FOOD, UTILITIES, LAUNDRY, TRANSPORT 750.00 12. Add the amount in the last column of line 10 to the amount in line 11. The result is the combined monthly income. 825.00 12 Write that amount on the Summary of Your Assets and Liabilities and Certain Statistical Information, if it applies Combined monthly income 13. Do you expect an increase or decrease within the year after you file this form? Yes. Explain: IF ABLE TO OBTAIN GAINFUL EMPLOYMENT, WILL LIKELY MAKE MORE MONEY THAN CURRENT SITUATION

Fill in this information to identify your case:							
Debtor 1	JACOB	NICHOLAS	RODRIGUEZ				
	First Name	Middle Name	Last Name				
Debtor 2 (Spouse, if filing)							
	First Name	Middle Name	Last Name				
United States Bankruptcy Court for the: Southern District of California							
Case number (If known)							

Check if this is:

An amended filing

A supplement showing postpetition chapter 13 income as of the following date:

MM / DD / YYYY

### Official Form 106J

# Schedule J: Your Expenses

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach another sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

	if known). Answer every question.							
Р	art 1: Describe Your House	ehold						
1.	Is this a joint case?  No. Go to line 2.  Yes. Does Debtor 2 live in a s  No  Yes. Debtor 2 must file	separate household? e Official Form 106J-2, <i>Expenses for</i>	Separate Household of Debtor	· 2.				
2.	Do you have dependents?  Do not list Debtor 1 and Debtor 2.  Do not state the dependents' names.	No Yes. Fill out this information for each dependent	Dependent's relationship to Debtor 1 or Debtor 2	Dependent's age	No Yes			
3.	Do your expenses include expenses of people other than yourself and your dependents?  Estimate Your Ongoing	No Yes ing Monthly Expenses						
ex		ankruptcy filing date unless you are uptcy is filed. If this is a supplemen						

4. The rental or home ownership expenses for your residence. Include first mortgage payments and any rent for the ground or lot.

4. Real estate taxes

4. \$ 0.00

4. Repose the first mortgage payments and any rent for the ground or lot.

4. \$ 0.00

4. \$ 0.00

4. \$ 0.00

4. \$ 0.00

4. \$ 0.00

Include expenses paid for with non-cash government assistance if you know the value of

Debtor 1

JACOB First Name NICHOLAS Middle Name RODRIGUEZ

Last Name

Case number (if known)

Your expenses 4c. 0.00 4c. Home maintenance, repair, and upkeep expenses 4d. 0.00 4d. Homeowner's association or condominium dues 0.00 5. Additional mortgage payments for your residence, such as home equity loans **Utilities:** 6. 0.00 6a. 6a. Electricity, heat, natural gas 0.00 6b. 6b. Water, sewer, garbage collection 0.00 6с Telephone, cell phone, Internet, satellite, and cable services 0.00 6d. Other Specify: 6d 7 80.00 Food and housekeeping supplies 0.00 8. Childcare and children's education costs 8. 9. 50.00 Clothing, laundry, and dry cleaning 9. 10. 40.00 Personal care products and services 10. 0.00 Medical and dental expenses 12. **Transportation.** Include gas, maintenance, bus or train fare. 12. 20.00 Do not include car payments. 80.00 13. Entertainment, clubs, recreation, newspapers, magazines, and books 0.00 14. Charitable contributions and religious donations Insurance. Do not include insurance deducted from your pay or included in lines 4 or 20 0.00 15a. 15a. Life insurance 0.00 15b. 15b. Health insurance 15c. 0.00 15c. Vehicle insurance 0.00 15d. Other. Specify: 15d. 16. Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20. 0.00 16. 17. Installment or lease payments: 17a. Car payments for Vehicle 1 0.00 0.00 17b. Car payments for Vehicle 2 17b. 17c. Other. Specify: 17c. 17d. Other. Specify: 17d. 18. Your payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule I, Your Income (Official Form 106I). 18. 0.00

19. Other payments you make to support others who do not live with you.

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 Debtor 1
 JACOB
 NICHOLAS
 RODRIGUEZ
 Case number (if known)

 First Name
 Middle Name
 Last Name

Your expenses 19. 0.00 Specify: 20. Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Income. 20a. 0.00 20a. Mortgages on other property 0.00 20b. 20b. Real estate taxes 20c. Property, homeowner's, or renter's insurance 20c. 0.00 0.00 20d. Maintenance, repair, and upkeep expenses 20d. 0.00 20e. 20e. Homeowner's association or condominium dues 0.00 21. Other. Specify: +\$ 22. Calculate your monthly expenses. 22a. Add lines 4 through 21. 22a. 270.00 22b. Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2 22b. 22c. Add line 22a and 22b. The result is your monthly expenses. 22c 270.00 23. Calculate your monthly net income. 23a. 825.00 23a. Copy line 12 (your combined monthly income) from Schedule I. 23b. 270.00 23b. Copy your monthly expenses from line 22c above. 23c. Subtract your monthly expenses from your monthly income. 23c. 555.00 The result is your monthly net income. 24. Do you expect an increase or decrease in your expenses within the year after you file this form? For example, do you expect to finish paying for your car loan within the year or do you expect your mortgage payment to increase or decrease because of a modification to the terms of your mortgage? Yes. Explain here: IF I AM ABLE TO OBTAIN GAINFUL EMPLOYMENT, EXPENSES WILL LIKELY INCREASE

Fill in this information to identify your case:							
Debtor 1	JACOB	NICHOLAS	RODRIGUEZ				
	First Name	Middle Name	Last Name				
Debtor 2 (Spouse, if filing)							
	First Name	Middle Name	Last Name				
United States Bankruptcy Court for the: Southern District of California							
Case number (If known)							

# Check one box only as directed in this form and in Form 122A-1Supp:

- 1. There is no presumption of abuse.
- The calculation to determine if a presumption of abuse applies will be made under Chapter 7 Means Test Calculation (Official Form 122A–2).
- The Means Test does not apply now because of qualified military service but it could apply later.

Check if this is an amended filing

Column A Column B

### Official Form 122A-1

### **Chapter 7 Statement of Your Current Monthly Income**

12/19

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for being accurate. If more space is needed, attach a separate sheet to this form. Include the line number to which the additional information applies. On the top of any additional pages, write your name and case number (if known). If you believe that you are exempted from a presumption of abuse because you do not have primarily consumer debts or because of qualifying military service, complete and file *Statement of Exemption from Presumption of Abuse Under § 707(b)(2)* (Official Form 122A-1Supp) with this form.

#### Part 1:

#### **Calculate Your Current Monthly Income**

1. What is your marital and filing status? Check one only.

Not married. Fill out Column A, lines 2-11.

Married and your spouse is filing with you. Fill out both Columns A and B, lines 2-11.

Married and your spouse is NOT filing with you. You and your spouse are:

Living in the same household and are not legally separated. Fill out both Columns A and B, lines 2-11.

Living separately or are legally separated. Fill out Column A, lines 2-11; do not fill out Column B. By checking this box, you declare under penalty of perjury that you and your spouse are legally separated under nonbankruptcy law that applies or that you and your spouse are living apart for reasons that do not include evading the Means Test requirements. 11 U.S.C. § 707(b)(7)(B).

Fill in the average monthly income that you received from all sources, derived during the 6 full months before you file this bankruptcy case. 11 U.S.C. § 101(10A). For example, if you are filing on September 15, the 6-month period would be March 1 through August 31. If the amount of your monthly income varied during the 6 months, add the income for all 6 months and divide the total by 6. Fill in the result. Do not include any income amount more than once. For example, if both spouses own the same rental property, put the income from that property in one column only. If you have nothing to report for any line, write \$0 in the space.

						ebtor		Debtor 2 or non-filing spous	е
2.	Your gross wages, salary, tips, bonuses, overtime, are (before all payroll deductions).	nd co	mmissio	ns	:	\$	0.00	\$	
3.	<b>Alimony and maintenance payments.</b> Do not include portion of the column B is filled in.	ayme	ents from a	a spouse if	:	\$	0.00	\$	
4. All amounts from any source which are regularly paid f of you or your dependents, including child support. Inc from an unmarried partner, members of your household, yo and roommates. Include regular contributions from a spous filled in. Do not include payments you listed on line 3.		nclud your	e regular dependen	contributions ts, parents,	:	\$	40.00	\$	
5.	Net income from operating a business, profession, or farm	Deb	tor 1	Debtor 2					
	Gross receipts (before all deductions)	\$_	0.00	\$					
	Ordinary and necessary operating expenses	-\$_	0.00	-\$					
	Net monthly income from a business, profession, or farm	\$_	0.00	\$	Copy here	\$	0.00	\$	
6.	Net income from rental and other real property	Deb	tor 1	Debtor 2					
	Gross receipts (before all deductions)	\$_	0.00	\$					
	Ordinary and necessary operating expenses	- \$_	0.00	- \$					
	Net monthly income from rental or other real property	\$_	0.00	\$	Copy here →	\$	0.00	\$	

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			Column Debtor		Column B Debtor 2 or non-filing spou	ıse
7.	Interest, dividends, and royalties		\$	0.00	\$	
8.	Unemployment compensation  Do not enter the amount if you contend that the amount re under the Social Security Act. Instead, list it here:		\$	0.00	\$	
	For your spouse	\$				
9.	Pension or retirement income. Do not include any amoubenefit under the Social Security Act. Also, except as state not include any compensation, pension, pay, annuity, or a United States Government in connection with a disability, disability, or death of a member of the uniformed services retired pay paid under chapter 61 of title 10, then include that it does not exceed the amount of retired pay to which entitled if retired under any provision of title 10 other than	ed in the next sentence, do lowance paid by the combat-related injury or If you received any hat pay only to the extent you would otherwise be	\$	0.00	\$	
10.	Income from all other sources not listed above. Specific Do not include any benefits received under the Social Sections as a victim of a war crime, a crime against humanity, or interrorism; or compensation, pension, pay, annuity, or allow States Government in connection with a disability, combat death of a member of the uniformed services. If necessary separate page and put the total below.	urity Act; payments received ternational or domestic vance paid by the United -related injury or disability, or				
	PAYMENTS FOR TAKING SURVEYS/STUDY GROUPS		\$	45.00	\$	
			\$		\$	
	Total amounts from separate pages, if any.		+ \$	45.00	+ \$	
11.	Calculate your total current monthly income. Add lines column. Then add the total for Column A to the total for Co		\$	85.00	<b>+</b> [\$	<b>=</b> \$85.00
						Total current monthly income
P	art 2: Determine Whether the Means Test Ap	plies to You				
12.	Calculate your current monthly income for the year. For	ollow these steps:				
	12a. Copy your total current monthly income from line 1	1		Сору	line 11 here 🗲	\$ 85.00
	Multiply by 12 (the number of months in a year).					<b>x</b> 12
	12b. The result is your annual income for this part of the	e form.			12b.	\$ 1020.00
13.	Calculate the median family income that applies to you	J. Follow these steps:				
	Fill in the state in which you live.	CA				
	Fill in the number of people in your household.	1				
	Fill in the median family income for your state and size of	nousehold			13.	\$ 65895.00

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Debtor 1	JACOB	NICHOLAS	RODRIGUEZ	Case number (if known)
	First Name	Middle Name	Last Name	

		list of applicable median income amounts, go online using the link specified in ns for this form. This list may also be available at the bankruptcy clerk's office	•
14.	How do 1	the lines compare?	
	14a.	Line 12b is less than or equal to line 13. On the top of page 1, check box 1, Go to Part 3. Do NOT fill out or file Official Form 122A-2.	There is no presumption of abuse.
	14b.	Line 12b is more than line 13. On the top of page 1, check box 2, <i>The presun</i> Go to Part 3 and fill out Form 122A–2.	mption of abuse is determined by Form 122A-2.
Pa	art 3:	Sign Below	
		By signing here, I declare under penalty of perjury that the information on thi	s statement and in any attachments is true and correct.
		X X	,
		Signature of Debtor 1	Signature of Debtor 2
		Date 09/30/2022	Date
		MM / DD / YYYY	MM / DD / YYYY

If you checked line 14a, do NOT fill out or file Form 122A-2.

If you checked line 14b, fill out Form 122A–2 and file it with this form.

Fill in this information to identify your case:							
Debtor 1	JACOB	NICHOLAS	RODRIGUEZ				
	First Name	Middle Name	Last Name				
Debtor 2 (Spouse, if filing)							
	First Name	Middle Name	Last Name				
United States E	Bankruptcy Court for the	Southern District	of California				
Case number (If known)							

Check if this is an amended filing

### Official Form 122A—1Supp

### Statement of Exemption from Presumption of Abuse Under § 707(b)(2) 12/15

File this supplement together with Chapter 7 Statement of Your Current Monthly Income (Official Form 122A-1), if you believe that you are exempted from a presumption of abuse. Be as complete and accurate as possible. If two married people are filing together, and any of the exclusions in this statement applies to only one of you, the other person should complete a separate Form 122A-1 if you believe that this is required by 11 U.S.C. § 707(b)(2)(C).

Part 1: Identify the Kind of Debts You Have

- 1. Are your debts primarily consumer debts? Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose." Make sure that your answer is consistent with the answer you gave at line 16 of the Voluntary Petition for Individuals Filing for Bankruptcy (Official Form 101).
  - No. Go to Form 122A-1; on the top of page 1 of that form, check box 1, There is no presumption of abuse, and sign Part 3. Then submit this supplement with the signed Form 122A-1.

Yes. Go to Part 2.

Part 2: Determine Whether Military Service Provisions Apply to You

2. Are you a disabled veteran (as defined in 38 U.S.C. § 3741(1))?

No. Go to line 3.

Yes. Did you incur debts mostly while you were on active duty or while you were performing a homeland defense activity? 10 U.S.C. § 101(d)(1); 32 U.S.C. § 901(1).

No. Go to line 3.

Yes. Go to Form 122A-1; on the top of page 1 of that form, check box 1, *There is no presumption of abuse*, and sign Part 3. Then submit this supplement with the signed Form 122A-1.

3. Are you or have you been a Reservist or member of the National Guard?

No. Complete Form 122A-1. Do not submit this supplement.

Yes. Were you called to active duty or did you perform a homeland defense activity? 10 U.S.C. § 101(d)(1); 32 U.S.C. § 901(1).

No. Complete Form 122A-1. Do not submit this supplement.

Yes. Check any one of the following categories that applies:

I was called to active duty after September 11, 2001, for at least 90 days and remain on active duty.

I was called to active duty after September 11, 2001, for at least 90 days and was released from active duty on \_\_\_\_\_, which is fewer than 540 days before I file this bankruptcy case.

I am performing a homeland defense activity for at least 90 days.

I performed a homeland defense activity for at least 90 days, ending on \_\_\_\_\_, which is fewer than 540 days before I file this bankruptcy case.

If you checked one of the categories to the left, go to Form 122A-1. On the top of page 1 of Form 122A-1, check box 3, The Means Test does not apply now, and sign Part 3. Then submit this supplement with the signed Form 122A-1. You are not required to fill out the rest of Official Form 122A-1 during the exclusion period. The exclusion period means the time you are on active duty or are performing a homeland defense activity, and for 540 days afterward. 11 U.S.C. § 707(b)(2)(D)(ii).

If your exclusion period ends before your case is closed, you may have to file an amended form later.

Fill in this information to identify your case:						
Debtor 1	JACOB	NICHOLAS	RODRIGUEZ			
	First Name	Middle Name	Last Name			
Debtor 2 (Spouse, if filing)						
	First Name	Middle Name	Last Name			
United States I	Bankruptcy Court for the	Southern District	of California			
Case number (If known)						

Check if this is an amended filing

### Official Form 107

## Statement of Financial Affairs for Individuals Filing for Bankruptcy

04/22

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Vhat is your current marital status?			
Married			
Not married			
Ouring the last 3 years, have you liv	ed anywhere other than where y	ou live now?	
Yes. List all of the places you live	in the last 3 years. Do not include	where you live now.	
Debtor 1:	Dates Debtor 1 lived there	Debtor 2:	Dates Debtor 2 lived there
		Same as Debtor 1	Same as Debtor 1
	From		From
Number Street	То	Number Street	 To
			_
City State ZIP Co	de	City State ZIP Code	
		Same as Debtor 1	Same as Debtor
	From		From
Number Street	 To	Number Street	 To
			_
City State ZIP Co	de	City State ZIP Code	
		valent in a community property state or te a, New Mexico, Puerto Rico, Texas, Washin	

Debtor 1 JACOB NICHOLAS RODRIGUEZ Case number (if known)

Part 2: Explain the Sources of Your Income

Middle Name

Last Name

4. Did you have any income from employment or from operating a business during this year or the two previous calendar years? Fill in the total amount of income you received from all jobs and all businesses, including part-time activities. If you are filing a joint case and you have income that you receive together, list it only once under Debtor 1.

No

First Name

Yes. Fill in the details.

	Debtor 1:		Debtor 2:		
	Source of Income Check all that apply.	Gross income (before deductions and exclusions)	Source of Income Check all that apply.	Gross income (before deductions and exclusions)	
From January 1 of current year until the date you filed for bankruptcy:	Wages, commissions, bonuses, tips Operating Business	\$15.00	Wages, commissions, bonuses, tips Operating Business	\$	
For last calendar year: (January 1 to December 31, 2021 YYYY)	Wages, commissions, bonuses, tips Operating Business	\$35.00	Wages, commissions, bonuses, tips Operating Business	\$	
For last calendar year before that: (January 1 to December 31, 2020 YYYYY	Wages, commissions, bonuses, tips Operating Business	\$3057.00	Wages, commissions, bonuses, tips Operating Business	\$	

5. Did you receive any other income during this year or the two previous calendar years?
Include income regardless of whether that income is taxable. Examples of other income are alimony; child support; Social Security, unemployment, and other public benefit payments; pensions; rental income; interest; dividends; money collected from lawsuits; royalties; and gambling and lottery winnings. If you are filing a joint case and you have income that you received together, list it only once under Debtor 1.

List each source and the gross income from each source separately. Do not include income that you listed in line 4.

No

Yes. Fill in the details.

	Debtor 1:		Debtor 2:	
	Source of Income Describe below.	Gross income from each source (before deductions and exclusions)	Source of Income Describe below.	Gross income from each source (before deductions and exclusions)
From January 1 of current year until the date you filed for bankruptcy:	PAYMENTS FOR ONLINE SURVEYS	\$255.00		\$ \$
	ACTUAL AND IN-KIND SUPPORT BY FAMILY MEMBERS (FOOD, HOUSING, ETC,)	\$ 9000.00		\$
		\$		
For last calendar year:	UNEMPLOYMENT	\$ 15718.00		\$
(January 1 to December 31, 2021 )	ECONOMIC IMPACT	\$1400.00		\$
YYYY	PAYMENT			\$
	GOLDEN STATE STIMULUS PAYMENT	\$600.00		

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	INTEREST	\$ 28.00	
For the calendar year before that:	UNEMPLOYMENT	\$ 17440.00	\$
	FEDERAL RECOVERY REBATE	\$ 827.00	\$\$
	457B DEFERRED COMPENSATION PLAN EARLY WITHDRAWAL	\$ 1572.00	Ψ

Case 22-02597-MM7 Filed 10/03/22 Entered 10/03/22 16:28:59 Doc 1 Pg. 55 of 71 Debtor 1 **JACOB NICHOLAS RODRIGUEZ** Case number (if known) First Name Middle Name Last Name Part 3: List Certain Payments You Made Before You Filed for Bankruptcy 6. Are either Debtor 1's or Debtor 2's debts primarily consumer debts? No. Neither Debtor 1 nor Debtor 2 has primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose." During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$7,575\* or more? No. Go to line 7. Yes. List below each creditor to whom you paid a total of \$7,575\* or more in one or more payments and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case. \* Subject to adjustment on 4/01/25 and every 3 years after that for cases filed on or after the date of adjustment. Yes. Debtor 1 or Debtor 2 or both have primarily consumer debts. During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$600 or more? No. Go to line 7. Yes. List below each creditor to whom you paid a total of \$600 or more and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case. Dates of Total amount paid Amount you still owe Was this payment for ... payment Mortgage Creditor's Name Car Credit Card Number Street Loan Repayment Suppliers or vendors Other State ZIP Code 7. Within 1 year before you filed for bankruptcy, did you make a payment on a debt you owed anyone who was an insider? Insiders include your relatives; any general partners; relatives of any general partners; partners; partnerships of which you are a general partner; corporations of which you are an officer, director, person in control, or owner of 20% or more of their voting securities; and any managing agent, including one for a business you operate as a sole proprietor. 11 U.S.C. § 101. Include payments for domestic support obligations, such as child support and alimony Yes. List all payments to an insider. Dates of **Total amount** Amount you still owe Reason for this payment payment paid Insider's Name Number Street

City

State ZIP Code

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Within 1 year before you filed for bankruptcy, did you an insider? Include payments on debts guaranteed or cosigned by ar		ents or transfer any pr	operty on account of a	debt that benefited
No.				
Yes. List all payments that benefited an insider				
	Dates of payment	Total amount paid	Amount you still owe	Reason for this payment Include creditor's name
Insider's Name	_	\$	\$	
Number Street	_			
City State ZIP Code	_			

Debtor 1 **JACOB NICHOLAS RODRIGUEZ** Case number (if known) First Name Middle Name Last Name Part 4: Identify Legal Actions, Repossessions, and Foreclosures 9. Within 1 year before you filed for bankruptcy, were you a party in any lawsuit, court action, or administrative proceeding? List all such matters, including personal injury cases, small claims actions, divorces, collection suits, paternity actions, support or custody modifications, and contract disputes. No Yes. Fill in the details. Nature of the case Court or agency Status of the case Case title JACOB N RODRIGUEZ V. STATE WRIT OF MANDATE CA SUPERIOR CT, COUNTY OF Pending CA DEPT. OF HEALTH CASE; NO MONETARY RELIEF SACRAMENTO On appeal CARE SERVICES ET AL. SOUGHT Court Name Concluded 720 9TH ST Number Street Case number 34-2022-80003973-CU-WM-GDS SACRAMENTO CA 95814 City State ZIP Code 10. Within 1 year before you filed for bankruptcy, was any of your property repossessed, foreclosed, garnished, attached, seized, or levied? Check all that apply and fill in the details below. No. Go to line 11. Yes. Fill in the information below. Describe the property Date Value of the property \$ Creditor's Name Explain what happened Number Street Property was repossessed. Property was foreclosed. Property was garnished. City State ZIP Code Property was attached, seized, or levied. 11. Within 90 days before you filed for bankruptcy, did any creditor, including a bank or financial institution, set off any amounts from your accounts or refuse to make a payment because you owed a debt? No Yes. Fill in the details. Describe the action the creditor took Date action Amount Creditor's Name Number Street Last 4 digits of account number: XXXX-City State ZIP Code

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otor 1	JACOB First Name	NICHOLAS Middle Name	RODRIGUEZ  Last Name	Case number (if known)
			uptcy, was any of your property in the possessic custodian, or another official?	on of an assignee for the benefit of
art 5	: List Certa	ain Gifts and Cont	ributions	
Wi	thin 2 years befo	ore you filed for bank	cruptcy, did you give any gifts with a total value	of more than \$600 per person?
	No			
	Yes. Fill in the o	letails for each gift.		
	Gifts with a total	al value of more than \$6	Describe the gifts	Dates you gave the gifts
	JONATHAN DA	ANIEL NOWELL	DESKTOP COMPUTER AS PERSONA	
	Person to Whom	You Gave the Gift	GIFT FOR DOZENS OF HOURS WORI HEAT FOR MY FAILED POLITICAL CA	
	2453 Laguardia		THE JUNE 7, 2022 PRIMARY ELECTION	
	Number Street		ASSISTANT	
	IMPERIAL	CA 9225	 1	
	City	State ZIP Co	ode	
	Person's relations	ship to you FRIEND		
Wi	thin 2 years befo	ore you filed for bank	cruptcy, did you give any gifts or contributions <b>v</b>	with a total value of more than \$600 to any charity?
	No			
	Yes. Fill in the o	details for each gift or	contribution.	
	Gifts or contrib	utions to charities than \$600	Describe what you contributed	Date you Value contributed
				\$
	Charity's Name			Ψ
	Number Street			
	Number Street			
	City	State ZIP Co	ode	
	-			
art 6	List Certa	ain Losses		
art 6	List Certa	ain Losses		
	hin 1 year befor	e you filed for bankru	uptcy or since you filed for bankruptcy, did you	lose anything because of theft, fire, other
Wit	hin 1 year befor aster, or gambli	e you filed for bankru	uptcy or since you filed for bankruptcy, did you	lose anything because of theft, fire, other
Wit	hin 1 year befor	e you filed for bankrung?	uptcy or since you filed for bankruptcy, did you	lose anything because of theft, fire, other

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Debtor 1 JACOB

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City

State ZIP Code

18. Within 2 years before you filed for bankruptcy, did you sell, trade, or otherwise transfer any property to anyone, other than property transferred in the ordinary course of your business or financial affairs? Include both outright transfers and transfers made as security (such as the granting of a security interest or mortgage on your property). Do not include gifts and transfers that you have already listed on this statement. Yes. Fill in the details. Description and value of property Date transfer Describe any property or payments received or debts paid in exchange was made transferred Person Who Received Transfer Number Street State ZIP Code Person's relationship to you 19. Within 10 years before you filed for bankruptcy, did you transfer any property to a self-settled trust or similar device of which you are a beneficiary? (These are often called asset-protection devices.) Nο Yes. Fill in the details. Description and value of the property transferred Date transfer was made Name of trust Part 8: List Certain Financial Accounts, Instruments, Safe Deposit Boxes, and Storage Units 20. Within 1 year before you filed for bankruptcy, were any financial accounts or instruments held in your name, or for your benefit, closed, sold, moved, or transferred? Include checking, savings, money market, or other financial accounts; certificates of deposit; shares in banks, credit unions, brokerage houses, pension funds, cooperatives, associations, and other financial institutions. No Yes. Fill in the details. Last 4 digits of account number Type of account or Last balance before Date account was instrument closed, sold, moved. closing or transfer or transferred Checking WELLS FARGO BANK, N.A. XXXX- 8978 07/08/2022 0.00 Name of Financial Institution Savings Money market PO BOX 5058 Number Street **Brokerage** Other

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Case number (if known)

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**NICHOLAS** 

Middle Name

RODRIGUEZ

Last Name

Debtor 1

**JACOB** 

First Name

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Debtor 1 JACOB NICHOLAS RODRIGUEZ

First Name Middle Name Last Name

Case number (if known)

Last Name

PORTLAND	OR	97208-5058				
City	State	ZIP Code				
			Last 4 digits of account number	Type of account or instrument	Date account was closed, sold, moved, or transferred	Last balance before closing or transfer
Ally Bank			XXXX- 6123	Checking	09/27/2022	\$ 0.00
Name of Financial Inst	itution			Savings		
P.O. Box 70377				Money market		
Number Street				Brokerage		
				Other		
Philadelphia	PA	19176-0377				
City	State	ZIP Code				
			Last 4 digits of account number	Type of account or instrument	Date account was closed, sold, moved, or transferred	Last balance before closing or transfer
Ally Bank			XXXX- 2704	Checking	09/27/2022	\$ 0.00
Name of Financial Inst	itution			Savings		
P.O. Box 70377				Money market		
Number Street				Brokerage		
				Other		
Philadelphia	PA	19176-0377				
City	State	ZIP Code				

21. Do you now have, or did you have within 1 year before you filed for bankruptcy, any safe deposit box or other depository for securities, cash, or other valuables?

No

Yes. Fill in the details.

	Who else had access to it?	Describe the contents	Do you still have it?
Name of Financial Institution	Name		No Yes
Number Street	Number Street		
City State ZIP Code	City State ZIP Code		

22. Have you stored property in a storage unit or place other than your home within 1 year before you filed for bankruptcy?

No

Yes. Fill in the details.

Who else has or had access to it?	Describe the contents	Do you still
		have it?

Debtor 1 Case number (if known) **JACOB NICHOLAS RODRIGUEZ** First Name Middle Name Last Name Nο Name of Storage Facility Name Yes Number Street Number Street City State ZIP Code City State ZIP Code Part 9: Identify Property You Hold or Control for Someone Else 23. Do you hold or control any property that someone else owns? Include any property you borrowed from, are storing for, or hold in trust for someone. Yes. Fill in the details. Where is the property? Describe the property Value Owner's Name Number Street Number City State ZIP Code City State ZIP Code Part 10: Give Details About Environmental Information For the purpose of Part 10, the following definitions apply: Environmental law means any federal, state, or local statute or regulation concerning pollution, contamination, releases of hazardous or toxic substances, wastes, or material into the air, land, soil, surface water, groundwater, or other medium, including statutes or regulations controlling the cleanup of these substances, wastes, or material. Site means any location, facility, or property as defined under any environmental law, whether you now own, operate, or utilize it or used to own, operate, or utilize it, including disposal sites. Hazardous material means anything an environmental law defines as a hazardous waste, hazardous substance, toxic substance, hazardous material, pollutant, contaminant, or similar term. Report all notices, releases, and proceedings that you know about, regardless of when they occurred. 24. Has any governmental unit notified you that you may be liable or potentially liable under or in violation of an environmental law? No Yes. Fill in the details. Governmental unit Environmental law, if you know it Date of notice Name of site Governmental unit Number Street Number Street

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Case 22-02597-MM7 Filed 10/03/22 Entered 10/03/22 16:28:59 Doc 1 Pg. 64 of 71 Case number (if known) RODRIGUEZ Debtor 1 **JACOB NICHOLAS** First Name Middle Name Last Name JACOB THE MOBILE NOTARY PUBLIC SELF-EMPLOYED CA NOTARY PUBLIC **Business Name** 866 DANENBERG DR Number Street Name of accountant or bookkeeper Dates business existed JACOB NICHOLAS RODRIGUEZ (DEBTOR 1) From 04/19/2019 To **EL CENTRO** CA 92243 State ZIP Code **Employer Identification number** Describe the nature of the business Do not include Social Security number or ITIN. DE JURE MEDIA LLC STILL-UNLAUNCHED BUSINESS IDEA FOR LEGAL CONTENT CREATION; NO ASSETS **Business Name** WHATSOEVER, ONLY EXISTS ON PAPER 30 N Gould St FOR NOW Number Street Dates business existed Name of accountant or bookkeeper Ste R JACOB NICHOLAS RODRIGUEZ (DEBTOR 1) From 11/02/2021 То Sheridan WY 82801 City State ZIP Code 28. Within 2 years before you filed for bankruptcy, did you give a financial statement to anyone about your business? Include all financial institutions, creditors, or other parties. No Yes. Fill in the details below. Date issued MM / DD / YYYY Name Number Street City State ZIP Code Part 12: Sign Below I have read the answers on this Statement of Financial Affairs and any attachments, and I declare under penalty of perjury that the answers are true and correct. I understand that making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

\_\_\_\_\_

Signature of Debtor 1

Date 09/30/2022

Signature of Debtor 2

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No	
Yes	
you pay or agree to pay someone who is not an atto	orney to help you fill out bankruptcy forms?
	orney to help you fill out bankruptcy forms?
you pay or agree to pay someone who is not an atte	orney to help you fill out bankruptcy forms?
	orney to help you fill out bankruptcy forms?  . Attach the Bankruptcy Petition Preparer's Notice,

Debtor 1	JACOB	NICHOLAS	RODRIGUEZ	
	First Name	Middle Name	Last Name	
Debtor 2 (Spouse, if filing)				
-	First Name	Middle Name	Last Name	
United States E	Bankruptcy Court fo	or the: Southern Dist	rict of California	

Check if this is an amended filing

12/15

### Official Form 108

### Statement of Intention for Individuals Filing Under Chapter 7

If you are an individual filing under chapter 7, you must fill out this form if:

- **■** creditors have claims secured by your property, or
- you have leased personal property and the lease has not expired.

You must file this form with the court within 30 days after you file your bankruptcy petition or by the date set for the meeting of creditors, whichever is earlier, unless the court extends the time for cause. You must also send copies to the creditors and lessors you list on the form.

If two married people are filing together in a joint case, both are equally responsible for supplying correct information. Both debtors must sign and date the form.

Be as complete and accurate as possible. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known).

Part 1: List Your Creditors Who Have Secured Claims

1.	For any creditors that you listed in Part 1 of Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D), fill in the information below.			
	Identify the creditor and the property that is collateral	What do you intend to do with the property that secures a debt?	Did you claim the property as exempt on Schedule C?	
	Creditor's D.D.S. COLLISION name:	Surrender the property.  Retain the property and redeem it.	No Yes	
	Description of REMAINS OF DESTROYED VEHICLE: 2015 property MAZDA MAZDA 3 (VIN: 3MZBM1U79FM223330)	Retain the property and enter into a Reaffirmation Agreement.		
	securing debt:	Retain the property and [explain]:		

#### Part 2: List Your Unexpired Personal Property Leases

For any unexpired personal property lease that you listed in *Schedule G: Executory Contracts and Unexpired Leases* (Official Form 106G), fill in the information below. Do not list real estate leases. *Unexpired leases* are leases that are still in effect; the lease period has not yet ended. You may assume an unexpired personal property lease if the trustee does not assume it. 11 U.S.C. § 365(p)(2).

Describe your unexpired personal property leases	Will the lease be assumed?
Lessor's name:	No
Description of leased property:	Yes

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Debtor 1 **JACOB**  **NICHOLAS** 

**RODRIGUEZ** 

Case number (if known)

First Name

Middle Name

Last Name

Part 3:

Sign Below

Under penalty of perjury, I declare that I have indicated my intention about any property of my estate that secures a debt and any personal property that is subject to an unexpired lease.

X	
	Signature of Debtor 1

Date 09/30/2022 MM / DD / YYYY X Signature of Debtor 2

MM / DD / YYYY

Debtor 1	JACOB	NICHOLAS	RODRIGUEZ	
	First Name	Middle Name	Last Name	
Debtor 2 (Spouse, if filing)				
-	First Name	Middle Name	Last Name	
United States E	Bankruptcy Court	for the: Southern Dist	rict of California	

## Mailing List

List contains the name and address of each entity included on Schedules D, E/F, G, H and Creditor Information.

D.D.S. COLLISION		
7501 SOUTH WESTERN AVENUE		
LOS ANGELES	CA	90047
LIEN SALE SERVICE		
PO BOX 9334		
1 O BOX 9334		
NORTH HOLLYWOOD	CA	91609
CITY OF SANTA MONICA		
PO BOX 515214		
LOS ANGELES	CA	90051-6514
AFFIRM INC		
650 CALIFORNIA ST		
FL 12		
SAN FRANCISCO	CA	94108
AFFIRM INC		
650 CALIFORNIA ST		
FL 12		
SAN FRANCISCO	CA	94108
AFFIRM INC		
650 CALIFORNIA ST		
FL 12		
SAN FRANCISCO	CA	94108
ALLY BANK		
P.O. BOX 70377		
PHILADELPHIA	PA	19176-0377
CAPITAL ONE		
PO BOX 85520		
RICHMOND	VA	23285

Debtor 1 JACOB NICHOLAS RODRIGUEZ

Case number (if known)

JACOB	NICHOLAS	KODKIO
First Name	Middle Name	Last Name

CAPITAL ONE		
PO BOX 85520		
RICHMOND	VA	23285
CITIBANK, N.A.		
50 NW POINT BLVD		
ELK GROVE VILLAGE	IL	60007
CBW BANK		
5301 KIETZKE LANE		
RENO	NV	89511
CBW BANK		
5301 KIETZKE LANE		
RENO	NV	89511
CREDIT ONE BANK NA		
PO BOX 98875		
FO BOX 90073		
LAS VEGAS	NV	89193
	140	
DISCOVER BANK		
PO BOX 15316		
WILMINGTON	DE	10050
WILMINGTON	DE	19850
JPMorgan Chase Bank		
PO BOX 15298		
WILMINGTON	DE	19850
JPMORGAN CHASE BANK		
PO BOX 15298		
WILMINGTON	DE	19850
MACYS/CITIBANK NA		
9111 DUKE BLVD		
MASON	ОН	45040
NET PAY ADVANCE, INC		
6820 WEST CENTRAL AVENUE		
WICHITA	KS	67212

Debtor 1 JACOB

JACOB NICHOLAS
First Name Middle Name

**RODRIGUEZ** 

Last Name

Case number (if known)

SEZZLE		
PO BOX 3320		
MINNEAPOLIS	MN	55403
CHECK 'N GO		
7755 MONTGOMERY ROAD		
CINCINNATI	ОН	45236
CHECK 'N GO		
7755 MONTGOMERY ROAD		
CINCINNATI	ОН	45236
ULINE		
PO BOX 88741		
1 2 2 3 1 3 3 1 1		
CHICAGO	IL	60680-1741
WEBBANK/DFS		
12234 N IH 35 SB		
BLDG B		
AUSTIN	TX	78753
WELLS FARGO BANK, N.A.		
101 EXECUTIVE CTR DR		
SUITE 201		
COLUMBIA	sc	29210
		202.0
WELLS FARGO BANK, N.A.  101 EXECUTIVE CTR DR		
SUITE 201		
COLUMBIA	SC	29210
COLUNIDIA		29210
LDC COLLECTION SYSTEMS		
PO BOX 515213		
LOS ANGELES	CA	90051-6513
TRUEACCORD		
16011 COLLEGE BLVD		
LENEXA	KS	66219
TRUEACCORD		
16011 COLLEGE BLVD		
LENEXA	KS	66219

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Case number (if known)

 Debtor 1
 JACOB
 NICHOLAS
 RODRIGUEZ

 First Name
 Middle Name
 Last Name

CA

94085

UPLIFT, INC.
440 NORTH WOLFE ROAD

SUNNYVALE

CA 94085

UPLIFT, INC.
440 NORTH WOLFE ROAD

SUNNYVALE